

ABSTRACT

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A STUDY OF THE IMPACT FOSTER CARE POLICIES HAVE ON
PERMANENCY OUTCOMES FOR CHILDREN IN
GEORGIA'S PRIVATE FOSTER CARE

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Dissertation dated May 2012

Permanency for children in care is defined as having a lasting family relationship that is safe and meant to last a lifetime. Child advocates recognize that permanency should be the goal for all children in foster care, but this belief was not actualized for many children who entered and remained in the system until adulthood. This study explored the impact of foster care policies on permanency outcomes for children in one private foster care agency in Georgia, Neighbor To Family. A Mixed Methods Triangulation Design, inclusive of both qualitative and quantitative measures was used to carry out the study. The research questions addressed include the following: Is there a statistically significant relationship between permanency rates of Group 1 and Group 2 and is there a statistically significant relationship between the length of stay rates of Group 1 and Group 2? The chi-square test of association was used to examine the

association between permanency outcomes in Groups 1 and 2 and length of stay rates in Groups 1 and 2. The results did not yield a statically significant relationship between the length of stay and permanency variables. However, further statistical testing of permanency and age variables within Group 1 resulted in a significant relationship at the $p < .05$ level. Due to the statistical results, the null hypothesis is accepted. Overall, when comparing the qualitative responses to the quantitative data, the qualitative piece provides another dimension that was absent from the statistical analyses. From the perceptions of foster care case managers, the majority were of the opinion that permanency outcomes are driven by other influences exclusive of federal policies. Most foster care case managers believe permanency in Georgia is driven by service delivery and the lack of funding to pay for foster care.

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GEORGIA'S PRIVATE FOSTER CARE

A DISSERTATION
SUBMITTED TO THE FACULTY OF CLARK ATLANTA UNIVERSITY
IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR
THE DEGREE OF DOCTOR OF PHILOSOPHY

BY

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ATLANTA, GEORGIA

MAY 2012

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ACKNOWLEDGEMENTS

All thanks and praises go to the Most High, for without His grace and mercy this journey would not have been possible. Completing this task required a tremendous amount of focus and determination. I thank all those around me, family, classmates, co-workers, and my study partner, Quenika, for keeping me focused and encouraging me through this process. Next, I would like to acknowledge my partner, Yvonne. Your patience, love, and support were a constant blessing. I acknowledge all the members of my dissertation committee; Dr. Lyle, Dr. Waymer, and Dr. Jackson. You are greatly appreciated for your never ending guidance.

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CHAPTER I

INTRODUCTION

Permanency in the child welfare field refers to a legally permanent and nurturing family for every child (Child Welfare Information Gateway, 2010). More specifically, a 2006 report written by Casey Family Services and the Children's Defense Fund writes, permanency for children in care means having a lasting family relationship that: is safe and meant to last a lifetime, offers the legal rights and social status of full family membership, provides physical, emotional, social, cognitive, and spiritual well-being for youth and ensures lifelong connections to extended family members. Child advocates recognize that permanency should be the goal for all children in foster care, but this belief was not actualized for many children who entered and remained in the system until adulthood.

Awareness of children languishing in care and not achieving permanency was first introduced in 1959 by authors Maas and Engler who published the results of their research on what ultimately became known as foster care drift, in their book, *Children in need of parents*. During the foster care drift, there were approximately 600,000 children in care (Doyle, 2007). At the time of their research, Maas and Engler documented a common practice in child welfare that allowed children to remain in foster care for extensive periods of time or, even worse, until the age of 18 when they aged out of care

(Talbot, 2005). Once children were removed from their homes, they were placed in care where they remained, drifting from one home to the next until they reached maturity.

Maas and Engler's (1959) findings created awareness around children's length of time spent in the child welfare system, which in turn led to other research efforts with the goal of ending the drift phenomena. These endeavors were carried into the 70's when child welfare systems nationwide felt pressured to increase permanency outcomes for youth and ultimately decrease the number of children in care (Block, 1981). One outcome of such research was the enactment of the Adoption Assistance and Child Welfare Act of 1980 (AACWA). This legislation re-conceptualized foster care as a temporary service. The new core elements became: family involvement, prevention, assessment, planning, and permanency (Child Welfare Information Gateway, 2010).

As new core elements were introduced to child welfare, there was an increasing need to create more policies around these elements to promote change within the system and increase permanency outcomes for children. Enacted in 1997, the Adoption and Safe Families Act (ASFA) furthered the goals of the Adoption Assistance and Child Welfare Act. ASFA placed emphasis on safety, established permanency timelines, and implemented a system of accountability for child welfare services (Child Welfare Information Gateway, 2011). Two important pieces of child welfare legislation, AACWA and ASFA promoted permanency and the overhaul of the system of care for children, but absent in the literature is the documented effect these policies have had on previous and current practices. These reforms allow a great deal of flexibility with respect to implementation, but little is known about how these laws were implemented into the

child welfare system and their effectiveness on permanency outcomes (Mitchell, Barth, Green, & Wall, 2005).

In addition to AACWA and ASFA, at the local level in the state of Georgia, in 2002, a class action lawsuit was filed on behalf of all children in foster care in Fulton and DeKalb Counties by Children's Rights, Inc. This lawsuit, *Kenny A. v. Perdue* prompted change within Georgia's child welfare system and has resulted in the *Kenny A. Consent Decree*. Signed in 2005, this Decree binds Fulton and DeKalb Counties to follow defined practices and meet specific targets emphasizing safety, permanency, and well-being (Barton Child Law & Policy Center, 2011).

Oftentimes, child welfare policy is rooted within a developmental perspective or theory. Permanency is no exception. Increased comprehension of attachment principles led to the passage of AACWA (Kemp & Bodonyi, 2002). As child welfare workers understand the importance of the parent-child bond through the lens of Attachment Theory, the need to achieve permanency should guide practice. With Attachment Theory in mind, family visitation accomplishes two goals -- maintaining the parent-child bond and achieving permanency for children in care at a faster rate. In order for children to return home, the birth family must complete their individual case plan. This permanency plan is developed by the Department of Family and Children Services. Developing these permanency plans from an ecological standpoint may possibly enhance the family's success at permanency and decrease reoccurring recidivism.

At the same time, having an understanding of child abuse and neglect from this perspective, a case manager then becomes cognizant of the multiple factors that contribute to child maltreatment. Recognized by Maluccio and Fein (1983), parents are

not solely to blame for maltreatment; societal and environmental variables also contribute. Creating permanency plans with this in mind, enables case workers to incorporate multifaceted interventions with children and their families; provisions of services and supports to meet the specific needs of the family, and promotion of addressing barriers that impede on the parent's ability to cope and adapt to stressful situations. Permanency planning from an ecological standpoint has historically improved permanency rates. In 1976, researchers Jones, Newman, and Shyne examined a demonstration project that involved numerous public and private child welfare agencies providing intensive family services to prevent removal or reunify youth in care with families. It was concluded that intensive services shortened the time spent in care or prevented initial placement (Rapp & Poertner, 1979).

Although desired, permanency is not always achieved for youth in foster care. This mixed methods study incorporates qualitative and quantitative data as a means of looking at the impact foster care policies have on permanency outcomes for children in Georgia's private foster care. This study compares two groups (Group 1 and Group 2) within a specified time frame. Data collection for Group 1, labeled the Policy Group, consisted of a file review of 241 children in Neighbor To Family, a private foster care organization in Georgia from 2003 through 2006. Group 2, known as the Kenny A Group, looks at the foster care data from foster children within the same organization, obtained from 2007 through 2010. Comparisons are made amongst the two groups with the goal of answering the following research questions; R_{Q1} : Is there a statistically significant relationship between the permanency rates of Group 1 and Group 2? R_{Q2} : Is there a statistically significant relationship between the length of stay rates of Group 1

and Group 2? Qualitative data is obtained from 10 private foster care case managers employed by Neighbor To Family to assess their knowledge of foster care policies and obtain their perspective as to whether foster care policies, the Kenny A Consent Decree, or some other phenomena contribute to children achieving permanency.

Chapter I presents background information with respect to the overall history of permanency and federal policies associated with permanency. The chapter presents a synopsis of issues within the foster care system nationally, and issues within Georgia's foster care system leading to reform under the Kenny A Consent Decree and court monitoring. Chapter I also introduces the statement of the problem, purpose of the study, identifies specific research questions and, finally, the hypotheses and significance of the study are indicated.

Background of the Problem

Inherently protected by the constitution, parents have a fundamental liberty to raise their children as they see fit. The legal framework surrounding the parent-child relationship balances the rights and responsibilities between the parents, the child and the state (Child Abuse Prevention and Treatment Act, 2003). When state intervention is necessary, interference is rooted in the concept of *parens patriae*. *Parens patriae* asserts the government's role in protecting the interests of children and becoming involved when parents or caregivers fail to provide proper care. The government enacts *parens patriae* when children are placed in the custody of the state due to substantiated allegations of maltreatment.

According to the Code of Federal Regulations, foster care is defined as substitute care for children outside of their own home which is available 24 hours (45CFR1355.20). On any given day there are thousands of children nationwide that reside in the homes of relatives, fictive kin or foster families. The child welfare system is responsible for the safety and well-being of all children. When children and teens are removed from unsafe and neglectful households, the state is making an attempt to improve the overall safety and well-being for these children by placing them in care.

As of September 2010, statistics presented by the Administration for Children and Families highlighted an estimated 408,425 children in foster care nationally according to the Adoption and Foster Care Analysis and Reporting System (Administration for Children and Families, 2010). In alignment with federal policies, permanency is an option for all children in care and should be actualized expeditiously. Federal laws establish the groundwork for states by identifying behaviors which define child abuse and neglect and are found within P.L. 93-247, also known as the Federal Child Abuse Prevention and Treatment Act (CAPTA). Originally signed into law in 1974 and rewritten in the Child Abuse Prevention, Adoption and Family Services Act of 1988 (P.L. 100-294), CAPTA is a key piece of legislation that guides child protection (Child Abuse Prevention and Treatment Act, 2003). Congress initiated CAPTA in response to rising numbers of child victims of abuse and neglect.

Noted in CAPTA is the government's belief that national policy is developed to strengthen families to prevent child abuse and neglect, provide support for services necessary to prevent children from entering into care, and promote reunification if removal has occurred (Child Abuse Prevention and Treatment Act, 2003). Promoting

reunification addresses foster care lag and promotes permanency for children in care. Another principle within CAPTA embodies the new direction of the child welfare system. The child protection system is noted as one that must be comprehensive, child-centered, family-focused, and community based. The system should include appropriate measures to prevent occurrence and in some cases recurrence of child abuse and neglect, and finally, should promote physical and psychological recovery and re-integration into an environment that fosters health, safety, self-respect, and dignity (Child Abuse Prevention and Treatment Act, 2003).

Permanency is a concept based on numerous values dealing with primacy of family, the importance of biological families, and the significance of parent-child attachment (Child Welfare Information Gateway, 2010). Understanding the importance of permanency in child welfare began in 1959 with the research findings of Maas and Engler. Maas and Engler expressed the detrimental effects long-term foster care had on children and they expressed the need for children to develop permanent relationships with caring adults. The ultimate goal of their research was to end foster care drift, or children remaining in care until they aged out.

In the 70's the child welfare system was still conceptualized and implemented with more of a caretaking focus rather than a system trying to achieve permanency for youth. Foster care statistics reported thousands of children continued to drift in care until they reached maturity. By the end of the 70s there was an estimated 200,000 children in care (Doyle, 2007). Through continued research and demonstration programs in the 1960s and 1970s, awareness was raised around the need for foster youth to achieve permanency. The landmark Oregon Project was the catalyst for future permanency

projects. Beginning in 1973 with a Federal grant, this project established that intensive services and deliberate planning could result in reunification or adoption of children who were in foster care for extensive periods of time (Child Welfare Information Gateway, 2011).

The child welfare system in Georgia has historically faced challenges in achieving permanency outcomes for foster children and is now under federal and legal pressure to reform. In 2006, the Center for Law and Social Policy (CLASP) stated that the average length of stay in care for foster children in Georgia was 25.9 months. At the time, this was slightly better than the overall national length of stay statistic of 28.3 months (Administration for Children and Families, 2006).

However, in Georgia in 2007, children waiting on the permanency goal of adoption faced a longer stay in care. The average length of stay in care was 43.8 months and for children that were actually adopted in 2007 spent longer than 3 years in care (North American Council on Adoptable Children, 2009).

In a 2010 report recognizing child welfare in the United States, data indicates Georgia's foster care children are averaging less than two years in care, more specifically 22.3 months (Center for Law and Social Policy, 2010). In 2002, a class action lawsuit was filed on behalf of all children in foster care in Fulton and DeKalb Counties in Georgia by Children's Rights, Inc. This lawsuit, *Kenny A. v. Perdue*, prompted change within Georgia's child welfare system and has resulted in the *Kenny A. Consent Decree*. Signed in 2005, this Decree binds Fulton and DeKalb to follow defined practices and meet specific targets emphasizing safety, permanency, and well-being (Barton Child and Law Policy Center, 2011).

Statement of the Problem

Children initially enter foster care due to substantiated allegations of abuse and/or neglect. Contact with Child Protective Services (CPS) occurs in the form of abuse and neglect referrals. In 2010, the U. S. Department of Health and Human Services issued their annual Child Maltreatment Report. It was estimated that within the US, approximately 3.3 million referrals were processed alleging maltreatment of approximately 5.9 million children. In 2010, child welfare agencies located in Georgia received roughly 38,578 referrals alleging child maltreatment. Of these referrals, 67% or 26,000 reports were screened in for additional services (Administration for Children and Families, 2010). These services included foster care placement.

There is a significant body of literature on Child Abuse and Neglect, Foster Care, Foster Parents, and Foster Care Reform. However, there is limited research on the efficacy of federal foster care policies after implementation. A review of the literature reveals this gap in the research which has ultimately led to interest in exploring this research topic. In many instances, policies are developed following a tragedy or to address an issue after it's brought to the forefront by the media. This was the case in Georgia. In 2010, the local newspaper, the Atlanta Journal Constitution painted a public picture of the foster care conditions found within Fulton and DeKalb Counties (the two counties named in the Kenny A. lawsuit). The system was described as one filled with inadequate oversight within foster homes and large facilities which ultimately led to foster children experiencing further abuse and neglect while in care (Judd & Schneider, 2010). Georgia has been under a consent decree since 2005. Five years later, the media

called attention to a system that was mandated by the courts to reform. This probe sparked a concerted effort of reform in Fulton and DeKalb Counties.

Questions arise as to the effectiveness of policies developed amid chaos and whether or not such policy making is productive. Bass, Shields, and Behrman (2004) concluded that policymaking in the aftermath of tragedy is over reactive and piecemeal. After published research in 1959 highlighting foster care drift, legislation was passed in the form of Public Law 96-272, The Adoption Assistance and Child Welfare Act (AACWA). The overall goal of P.L. 96-272 was to promote permanency and decrease the number of children in foster care. To further AACWA, in 1997, the Adoption and Safe Families Act (ASFA) or P.L. 105-89 was passed. ASFA presented adoption as a solution to the numerous children in care. The literature gaps do not speak to the effectiveness of these policies.

Children enter care for a variety of reasons all associated with some form of maltreatment. According to the Center for Disease Control, maltreatment encompasses all types of abuse and neglect directed towards a child under the age of 18 by a parent, caregiver, or an individual in a custodial role. There are four categories of maltreatment. They include physical abuse, sexual abuse, emotional abuse and neglect. Federal laws establish the groundwork for states by identifying behaviors which define child abuse and neglect. These behaviors are found within Public Law 93-247 also known as CAPTA. Despite the reasons for entry into care, according to policy, the goal is for every child to achieve permanency within the shortest time possible.

At the end of the 2010 Federal Fiscal Year (FFY), a report issued by the Center for Law and Social Policy documented an estimated 408,425 children living in foster care

an average of 25 months. Statistical data for Georgia identified over 12,000 children in care beginning in January 2010 with an average length of stay of 22 months (Center for Law and Social Policy, 2010). At the end of 2010, there was a sharp decline in the number of children in foster care for Georgia. An estimated 5,000 children exited care resulting in a decrease of Georgia's foster care population to 6,895. Georgia is currently experiencing a different trend. From January to August 2011, there has been a 12% increase in the number of children in the child welfare system (Georgia Department of Human Services, 2011).

Nationwide, children who exited care in 2010 averaged a length of stay of 21 months (Administration for Children and Families, 2010). In Georgia, 70% of children exiting care averaged a length of stay under a year (Center for Law and Social Policy, 2010), but permanency is not easily achieved for children waiting to be adopted nationwide or within Georgia. Almost 80% of children waiting to be adopted in Georgia have been in care more than 2 years (Center for Law and Social Policy, 2010).

Nationally, children waiting for adoption as permanency have been in care 37 months (Administration for Children and Families, 2010). Longer lengths of stay in care are possible indicators that permanency is not easily reached for all children and teens who enter foster care. To address this issue, during the 70's and 80's, the federal government enacted a series of foster care policies aimed at decreasing the length of stay for children in foster care and increasing permanency outcomes.

Summarily, the federal government has passed six key pieces of legislation in hopes of promoting permanency outcomes. They include; Adoption Assistance and Child Welfare Act of 1980 (AACWA), Adoption and Safe Families Act of 1997 (ASFA),

Foster Care Independence Act of 1999, Promoting Safe and Stable Families Amendments of 2001, Adoption Promotion Act of 2003 and an amendment to CAPTA known as Keeping Children and Families Safe Act of 2003. This study looks at two fundamental legislations, AACWA and ASFA as provisions found within these laws are at the foundation of foster care policies implemented after 1997.

This study analyzes foster care policies and their impact on permanency outcomes for foster care children that were once placed with or are currently placed with Neighbor To Family, a private foster care agency in Georgia. This analysis compiled data and information from the foster care files of children that were in care beginning in 2003 and ending in 2010. The study divided the sample into two groups (Group 1 and Group 2). Group 1, the first independent variable contains the following policies: the Adoption Assistance and Child Welfare Act and the Adoption and Safe Families Act. Group 2, the second independent variable consists of data pertaining to the Kenny A Consent Decree. The researcher examined permanency rates subsequent to the signing of the consent decree in 2005.

This study provides an in-depth discussion of the components of the law suit and the mandatory changes Georgia is required to incorporate into the current child welfare system. These policies and consent decree are analyzed in this study as they relate to permanency outcomes for children in Georgia's foster care system. As a result of continued long lengths of stay data, there was a need to further explore foster care policies and the impact they have on permanency outcomes.

Purpose of the Study

This study explores the impact foster care policies have on permanency outcomes for children in one private foster care agency in Georgia, Neighbor To Family. A Mixed Methods Triangulation Design, inclusive of both qualitative and quantitative measures was used to carry out this study. According to Creswell & Clark (2007), this design is utilized to obtain different, but complimentary data on the same subject to better understand the research problem.

As Social Workers we frequently come into contact with individuals in difficult situations with a complexity of needs. In order to better assist persons in need, social workers engage a variety of services to meet the specific needs and improve the lives of others. Research in the field of social work should employ the same approach to better understand the needs and issues of children and families. Clark, Huddleston-Casas, Churchill, Green, and Garrett (2008) report that family scientist conduct research to describe and explain the complexity of families. The ability of family scientists to study complex phenomena is restricted when they are limited to one type of research methodology.

For the purpose of this study, a mixed methods approach was necessary to fully understand the quantitative data regarding permanency outcomes and the qualitative data is collected via surveys from foster care case managers. The survey responses provided perceptions from foster care case managers relative to permanency issues. This perspective would have been lost if the research design were exclusively quantitative. The independent variables for this study are the historical foster care policies, the Adoption Assistance and Child Welfare Act and the Adoption and Safe Families Act.

The second independent variable is the Kenny A. Consent Decree. The dependent variable for this study is permanency outcomes.

Research Questions

This study explores the impact foster care policies have on permanency outcomes for children in private foster care in Georgia. The study addressed the following research questions:

R_{Q1}: Is there a statistically significant relationship between the permanency rates of Group 1 and Group 2?

R_{Q2}: Is there a statistically significant relationship between the length of stay rates of Group 1 and Group 2?

Hypotheses

The purpose of this study is to explore the impact foster care policies have on permanency outcomes for children in private foster care in Georgia. This study hypothesized that:

H₁: There is a statistically significant relationship between the permanency rates of Group 1 and Group 2.

H₀: There is no statistically significant relationship between the permanency rates of Group 1 and Group 2.

H₂: There is a statistically significant relationship between the length of stay rates of Group 1 and Group 2.

H₀: There is no statistically significant relationship between the length of stay rates of Group 1 and Group 2.

Significance of the Study

Since awareness of foster care drift and studies highlighting the detrimental effects of placement in care, foster care reform has focused on improving permanency outcomes for children in care through the implementation of policies. In 2008, Gina Russo from the nonprofit public policy advocacy group, Prevent Child Abuse America teamed up with the Ben Tanzer from the *Kids are Waiting Campaign: Fix Foster Care Now* and produced a report drawing attention to the astonishing costs of child welfare. This economic analysis asserted that child abuse and neglect is costing the nation over 100 billion dollars a year. Most federal and child welfare funds are drained of dollars necessary for prevention and support services. The cost of child welfare is expensive. Systems nationwide are seeking to cut expenses and less children in care equates to less money necessary to fund foster care.

This research study is important in addressing not only the number of children that enter care annually, but the amount of time they remain in foster care and for some, never achieving permanency. As the legislature enacted policies with the goal of increasing permanency outcomes for foster care children, policy efficacy is important as the foster care census continues to grow. The overall goal of the child welfare system is to keep children safe. Nationwide, foster care statistics are on a decline with respect to children in care, but questions arise as to the nature of the decline and whether it is related to good work or economic cut backs.

Results from this study contribute to the child welfare body of literature in two ways. First, this study examines specific foster care policies aimed at increasing permanency outcomes for children in care. Results will present the statistical strength of

federal policy and permanency outcomes. Secondly, this study looks at foster care in Georgia within the private sector and the results will challenge the concept that children are achieving permanency due to effective policy implementation. On June 6, 2002, Children's Rights filed a lawsuit charging that Georgia's Department of Family and Children Services (DFCS) in Fulton and DeKalb Counties were placing children at risk by operating an overburdened and poorly managed child welfare system. On June 27, 2005, then Governor Purdue signed the Kenny A. Consent Decree which binds Georgia Counties, Fulton and DeKalb to abide by defined practices and meet specific targets.

This decree outlines certain principles and requirements for administrators and case managers. From this lawsuit derived Georgia's push towards family centered practice and the creation of pilot programs which focused on achieving permanency for children and teens in care. The theme within this decree is permanency. Kenny A notes that foster care should be as temporary an arrangement as possible, with its goal being to provide a permanent home for the child as quickly as possible (Kenny A. Consent Decree, 2005). The results of this mixed methods study will add a qualitative dimension to the research and present foster care case manager's perceptions of permanency outcomes.

Summary

Chapter I introduced the Mixed Methods Triangulation Design for this study which addresses the impact foster care policies have on permanency from qualitative and quantitative perspectives. The purpose of this study is to explore the impact foster care policies have on permanency outcomes for children in Georgia's private foster care.

Chapter I also presented the historical aspects of permanency that lead to the enactment of federal policies addressing permanency outcomes for youth in foster care. The research questions and hypotheses were outlined in this chapter in addition to expected contributions to child welfare literature.

Chapter II provides a review of the relevant literature surrounding historical components of child welfare and federal foster care policies. Presented also in Chapter II is an in depth discussion of permanency outcomes and the current structure of Georgia's foster care system and reform initiated after the Kenny A Consent Decree. Finally, the second chapter presents Attachment Theory and the Ecological Perspective as the theoretical frameworks to understanding the importance of permanency and service delivery.

CHAPTER II

REVIEW OF THE LITERATURE

This is a study of the impact foster care policy has on permanency outcomes for foster care children in Georgia's private foster care. The purpose of this chapter is to provide a synthesis of relevant literature pertaining to the child welfare system. Topics covered include: the historical background of foster care, foster care policies, the Kenny A Consent Decree, and the concept of permanency. Finally, Chapter II presents Attachment Theory and the Ecological Perspective as the theoretical frameworks on which this study is based.

Each year, over two million children are investigated for child abuse and neglect in the United States and half are found to be abused (Administration for Children and Families, 2010). Consequently, as Doyle (2007) reports, approximately 10 percent of these abused children will be placed in protective custody. Early on, those concerned about child abuse and neglect were mostly concerned with children from the poorest families who were often orphaned, abandoned or unsupervised (Schene, 1998). More often than not, it was the poor that were separated from their families and placed in an alternative living environment.

Historically, children enter care due to the encompassing and detrimental effects of poverty which research shows correlates with child maltreatment. Poverty has always

increased the risk of children being removed from their families and placed elsewhere (Hasci, 1995). Impoverished families often lack the means to support their children due to the lack of and access to resources. This deficiency sometimes leads to the inability of parents to care for their children adequately in the form of appropriate clothing, food, shelter, and emotional stability which is considered neglect and a reason children come into care. Poverty is a re-occurring theme found in the literature which appears to justify removing children from their homes and placing them into care.

Current Findings

An extensive search of the literature failed to identify specific and current research related to foster care policies and their impact on permanency outcomes for children in foster care. This literature gap is evident in both the fields of Social Work and Public Policy. The literature presented in this chapter is representative of database searches of various disciplines including Social Work and Public Policy abstracts, and journals, Journal Storage (JSTOR- archive of academic journals, and ProQuest). Additional literature was obtained through the review of government documents highlighting maltreatment and federal legislation.

This review encompassed title searches related to foster care such as: foster care policy, foster care statistics, and permanency outcomes. The literature presented in this section is divided into five parts. The first section recounts the historical lineage of foster care. Next, the Adoption Assistance and Child Welfare Act and the Adoption and Safe Families Act are presented as the original and essential foster care legislations enacted to increase permanency. Following policies, the Kenny A. lawsuit is presented and

components of reform within Georgia are discussed. Subsequently, permanency is presented and explored in-depth and permanency objectives are defined. Finally, permanency the chapter concludes with the presentation of Attachment Theory and the Ecological Perspective as the Conceptual Frameworks for this study.

Historical Background

Caring for needy and dependent children has an immense history which expands across decades. The foundation for the early child caring system did not include values of child nurturing. Prior to 1850, a child's need for nurturance was not recognized. Children were understood to be a means of profit and cheap labor as evidenced by the indenture system. Over the years, these early ideologies have progressed and have since been replaced by beliefs which include understanding the importance of a safe and loving environment for all children.

It was not until the eighteenth and nineteenth centuries where the legal framework for child protection was instituted under the English Poor Law. In 1983, McGowan documented the legal basis for all efforts to protect children in colonial times rested within the English Poor Law of 1601. The Poor Law placed public responsibility for the poor in the hands of the community. The English Poor Law is often viewed as the backbone of the child welfare system within the United States. Developed initially to address economic issues and social circumstances of the poor, this law later evolved and was affected by attitudes and changing perceptions associated with poverty (Slack, 1990).

Established in England, the English Poor Law was implemented in 1597, when Parliament passed the law (39 Elizabeth, c. 3) making it the responsibility of each parish to maintain its poor inhabitants (Boyer, 1990). This responsibility manifested into the indenture system. During colonial America, children from all classes were oftentimes indentured to families where they were expected to live, work, and learn a trade (Hasci, 1995). Early on, the indenture system was identified as America's first form of foster care.

Indenturing reflected society's concerns for the welfare of children, but underneath those concerns stood alternative agendas. Ashby (1997) suggests the indenture system displayed a concern for children's welfare, but the system also manifested a fundamental truth: the priorities, needs, and expectations of adults determined policies concerning children. Adults, on their own terms, defined children's needs. The economic well-being of society was at the heart of the second agenda. Due to personal agendas, child policy was frequently laced with economic outcomes. In the end, indenture reflected the need to keep tax loads down by avoiding public expenses, and the assumption that children were economic assets, not as property under common law, but as sources of labor (Ashby, 1997).

When children were removed from their homes and indentured, the relationship or attachment and bond between the parent and child was severed. As justification for family intervention, the doctrine known as *parens patriae* was instituted. *Parens patriae*, or the ruler's power to protect minors was the government's way of legitimizing the removal of children from their homes as a means of protection and to either enforce parental duty or place the child in a substitute care setting (Otto & Melton, 1990).

Common laws still acknowledged parents as the natural caretakers of their children, however, under *parens patriae*, the state had the power to remove children from the home if their safety, morals, or the community's interest required intervention (Ashby, 1997). This doctrine was the foundation for government intervention with families in order to keep children safe, and remains the current justification for removing youth from unsafe home environments and placing them into care.

During the 1800s, almshouses were additional placement options for children. Almshouses developed as a method to help the poor. Throughout the colonial period in Massachusetts, poverty was viewed as a social problem that had to be addressed by communities in two ways. Outdoor relief consisted of cash handouts and individuals boarding with families and working for a specified time frame (Turner, 2003). The second way of helping the poor emerged in the 1750s. Towns built poorhouses, workhouses, and town farms in which individuals would work for the town support (Turner, 2003). Blending these two responses to poverty resulted in almshouses.

Almshouses provided minimal standards of care to orphaned or needy children. They also served as hospitals for those suffering with mental illness. Marciarille (2011) describes almshouses as a medical system of care for the poor who were sick, or those suffering with mental illness and lacked family to care for them. Almshouses were residences of last resorts. This placement system soon came under attack due to the impact their unsafe and unsanitary conditions had on children. Unlike current institutional settings, children were housed with adults and this created an environment that left children susceptible to further abuse in some instances. Due to unsafe conditions for children, private and religious groups established orphanages and separated needy

children from adults, disease, maltreatment, and exploitation faced in almshouses (Schene, 1998).

The transformation from the indenture system to orphan asylums began in the 1800's. Another variation of the indenture system known as placing out was also in practice. Hasci (1995) describes placing out as a process of moving children from poor and urban families to rural homes. As Hasci (1995) reports, this change was influenced by amended views of children. Historically, children were viewed as a means of economic growth. The new perception recognized that childhood was a separate stage in life that should be cultivated and nurtured. This paradigm shift also encouraged the removal of children from impoverished families where there was an absence of a nurturing environment.

According to Askeland (2006), orphanages first started appearing in the American colonies before the Revolutionary War, but they were few in number until the 1830s, when several were constructed in response to poverty and the breakup of kinship networks resulting from large scale immigration and urbanization. During most of the nineteenth century, child caring institutions were funded by private and religious organizations. In 1832, placing children in orphan asylums was the result of the cholera epidemic and increasing numbers of those living in poverty (Carp, 1999). The vast number of asylums made this the number one method in which the nation cared for orphaned youth. The end of the 19th century brought another change in ideology. There was new push to move children from institutional settings to family environments.

Acknowledged as the father of modern day foster care, Charles Loring Brace was the man behind the movement that believed all children belonged in rural Protestant

families. Met with controversy, supporters and non-supporters of Brace's methods argued his intentions from a social benevolence perspective versus social control. In literature, Brace is presented as either the father of modern foster care or as the principal architect of social policy aimed at breaking up working-class families (Gish, 1999). Brace did not believe in placing children in institutions, instead he saw an opportunity to merge urban problems with those of rural areas that complained about the lack of workers available to build up the country (Askeland, 2006).

Founded by Brace in 1853, the Children's Aid Society (CAS) was the pre-eminent child-saving organization of the 19th century that Brace would use to fulfill his emigration program, which is considered one of the most influential and controversial programs in the child-saving movement (Gish, 1999). Through placing out, Brace and the CAS sought to enrich the lives of poor or homeless children. Under this system of care, foster parents agreed to provide education, religious training, and job preparation until the youth in their care turned 16 (Colton & Williams, 1997).

Under placing out, children living in poverty were selected even if their families were intact (Bryant, 1981). From 1853 to 1929, Brace purportedly removed and placed approximately 200,000 youth in rural settings (Jalongo, 2010). Brace harbored the belief that if removed from their urban setting, children would have the opportunity to grow up in an environment that would allow them to become productive members of society. In the article, *Rescuing the Waifs and Strays of the City*, by Gish (1999), the emigration program is described as a plan to remove as many poor children as possible from the contaminating influences of their families and place them with Christian homes in the Midwest.

As a result of the Children's Aid Society placement movement, other religious and social agencies became involved in foster care. This movement was mostly evident in Massachusetts, Pennsylvania, and South Dakota. The system of placing out merged with growing support around adoption and further led to the passage of adoption laws. In Boston, the Home for Little Wanderers strongly encouraged adoption (Ashby, 1997).

The placing out program was met with both acceptance and resistance. Individuals in favor of Brace's efforts held that intervention was necessary because the needs of children and their welfare were paramount. As Gish (1999) reports, these same supporters sited child-savers as changing the position of the child within the family and society from one of advantage to the belief that the needs of children come first. At the other end of the spectrum author Michael Katz (1986) blames Brace for making family disruption an acceptable policy in social work in his book, *In the Shadow of the Poorhouse*.

Currently, amidst America's child welfare system, all allegations of child abuse and neglect are investigated by Child Protective Service (CPS) agencies within their respective states. From a historical perspective, CPS agencies were formally known as anti-cruelty societies. Established in 1874, the New York Society for the Prevention of Cruelty to Children (NYSPCC) was the first child protection agency in the world marking the birth of formalized child protection (New York Society for the Prevention of Cruelty to Children, 2011).

Child protection progressed amongst a wave of reform and was a spontaneous reaction to various events unprecedented in the magnitude of their impact (NYSPCC, 2011). NYSPCC was formed in response to the maltreatment of children. Initial anti-

cruelty laws were enacted on behalf of animals, but support for child maltreatment was obsolete. This agency was primarily concerned with the enforcement of law and the punishment of the offender (Carstens, 1912). In turn, New York passed a law to protect children and punish wrongs done to them, giving the NYSPCC and future anticruelty societies a legal foundation and a mandate to identify children who were being mistreated by their families (Folks, 1902).

In 1874, Etta Wheeler, a church worker was notified of a child cruelty case. After others objected to intervention, Wheeler brought the case of Mary Ellen to the NYSPCC, and within 48 hours, Mary Ellen was in an alternative placement (NYSPCC, 2011). The NYSPCC affirmed the goal of protecting children and their overall mission as stated in the organization's documented history was to:

To rescue little children from the cruelty and demoralization which neglect, abandonment and improper treatment engender; to aid by all lawful means in the enforcement of the laws intended for their protection and benefit; to secure by like means the prompt conviction and punishment of all persons violating such laws and especially such persons as cruelly ill treat and shamefully neglect such little children of whom they claim the care, custody or control (p. 7).

Early statistics from the NYSPCC report that in the first eight months of operation, the organization received and investigated hundreds of complaints, prosecuted approximately 68 cases and rescued 72 children from abuse and neglect (NYSPCC, 2011). The New York SPCC was instrumental in advocating for laws against child abuse

and neglect. Presently, a significant portion of modern child protective legislation is rooted in laws that were advocated by members of the NYSPCC (NYSPCC, 2011). The Progressive Era presented new perspectives in caring for children as the system became more professionalized. Reformers embraced and spread new attitudes that supported providing services to the family that would enable parents to care for their children and prevent their children from entering care. This approach supported the belief that children belonged with their families and further solidified the importance of parent-child attachment. Currently this form of intervention is known as prevention. The prevention agenda was supported early on in 1909 at the first White House Conference on Children. According to Shulz (1924), a policy statement was issued at the conference that affirmed no child should be removed from their home unless it is impossible to make the conditions within the family safe.

This transformation chronicled a shift in the child welfare system. The child welfare field pinpointed efforts on rehabilitative services which were in contrast to the previous method of issuing punitive interventions. As a result by the 1930s and 1940s the number of public agencies involved in caring for children increased. As Schene (1998) writes, the growing acceptance by states of the responsibility for child protection, marked a new era in the child welfare movement. This era gave rise to the involvement of the federal government in matters of child welfare.

Foster Care Policies

In its entirety, the child welfare system is charged with keeping children safe and establishing permanency for youth in care as quickly as possible. Although child

protective service agencies are under constant reform due to budget cuts and compliance issues, reunification remains paramount. This preference for reunification is embedded in American traditions and the legal framework which support parent's constitutionally protected rights. Therefore it is highly unlikely that the basic framework for child welfare policy and practice in the U.S. will change (Wulczyn, 2004).

Government intervention in cases of suspected abuse and neglect was promoted in the mid fifties by Vincent DeFrancis of the American Humane Association. During that time, DeFrancis facilitated the first national survey on child abuse and neglect and wanted all child protective workers to play a more active role in cases of suspected abuse and neglect. In addition to more active caseworkers, DeFrancis urged the federal government to become involved in protective services (Ashby, 1997). His suggestions for government intervention never gained momentum despite support from the Children's Bureau. Rymer (1993) notes, in 1957, the Children's Bureau issued the first major statement from a federal agency that child abuse deserved national attention. This statement implored child welfare departments to take on an aggressive stance with cases of abuse and neglect. However, child maltreatment problems were ignored until the work of Dr. Henry C. Kempe who introduced the Battered-Child Syndrome.

As a result of medical advancement in radiology technology, doctors were able to visualize and document abuse. In 1962 Kempe published the first empirical work on the battered child syndrome in the United States (Stagner & Lansing, 2009). Kempe's study chronicled 300 cases of suspected abuse found in emergency rooms and developed diagnostic tools for child welfare workers and physicians (Stagner & Lansing, 2009). With expectations of protecting children, Kempe prepared recommendations within

public policy that expressed the need for an official reporting system. This recommendation would later come to fruition in foster care legislation.

In 1997, statistics presented by the Child Welfare League of America presented a spike in reporting suspected incidents of abuse created an influx of children entering foster care. From 1980 to 1995, children in out of home placements increased significantly from 302,000 to 483,000 (Petite & Curtis, 1997). As numbers skyrocketed, Congress was forced to address the issues that plagued the child welfare system. The government was charged with taking the lead in child welfare reform and did so by enacting six pieces of legislation. Of the six, the most important were the Adoption Assistance and Child Welfare Act and the Adoption and Safe Families Act. These laws are at the heart of child welfare reform and components of these policies are noticeable in future child welfare policies after 1997. Provisions found in these laws included specific mandates concerning permanency, case reviews, establishing accountability systems which assess state performance, implemented adoption initiatives, and provided funds for pilot programs across the nation which tested new strategies.

This section contains a review of the two major key pieces of federal legislation which were the starting point of child welfare reform: The Adoption Assistance and Child Welfare Act of 1980 (AACWA, P.L. 27-296) and the Adoption and Safe Families Act of 1997 (ASFA, P.L. 105-89). There were additional pieces of legislation devoted to child welfare reform. However they correspond directly to permanency outcomes and will be discussed within the permanency section. Prior to discussing the above foster care policies, it is important to first understand the Social Security Act of 1935 (SSA), the funding structure for foster care. A recurring theme in the qualitative data of this study

was funding and how the lack of funding for child welfare within Georgia ties directly to permanency outcomes for children in care.

Social Security Act of 1935(H.R. 7260)

In 1935, the government introduced the Social Security Act (SSA) as a means of providing for the general welfare through a system of old age benefits, in addition to enabling states to make adequate provisions for various populations including dependent and crippled children (Social Security Administration, 2011). The Social Security Act (SSA) of 1935 proved pivotal in financing the American child welfare system. Funding for child welfare was initially authorized under Title V of the SSA, but an abundance of amendments to this legislation has since expanded federal dollars for child welfare services. This act became one of America's single most important pieces of legislation that developed a collection of programs designed to help various groups of Americans. The Social Security Act is the foundation for government participation in the foster care system (Duncan & Argys, 2007).

In 1958, the states witnessed the first amendment which required states to match funds in order to draw down their share of federal dollars. In 1967, Title V evolved into Title IV-B, Child Welfare Services. Listed as Title IV-A, Aid to Dependent Families and Children (AFDC), in 1969, amendments to SSA made mandatory the provision of foster care to AFDC recipients in each state and broadened eligibility requirements to include potential and actual AFDC recipients (Dore & Kennedy, 1981). Since Title IV-B was growing at a slow rate, Congress expanded the use of Title IV-A. This new change provided foster care funding for children in AFDC families.

This recent amendment of SSA resulted in concerns in the 1970s due to the amount of children receiving Title IV-A funds and the longer lengths of stay in care for foster children. States were entitled to IV-A funds for AFDC eligible children where as IV-B funds were capped. Congress debated whether this guarantee funding encouraged states to unnecessarily place children in foster care. Children were deemed eligible if a court determined that remaining in the home was not conducive to the child's welfare (Social Security Administration, 2011). The outcome of this amendment was an increase in foster care statistics. Dore and Kennedy (1981) note the foster care population jumping from 5,779 children in 23 states in 1965, to an estimated 79,527 children in 1972. Coupled with providing reimbursements, the law extended the number of protections for children in foster care. IV-B funding eligibility was now based on whether or not a child came from a family receiving AFDC or if that child came from a family eligible for AFDC.

Growing concerns over the increasing foster care population led to new legislation to address foster care lag. In 1980, Congress passed the Foster Care and Adoption Assistance Amendments. Under this law emerged a separate title, Title IV-E, Foster Care and Adoption Assistance in the SSA. This separation provided funding to two categories of child welfare, foster care and adoption (Child Welfare League of America, 2011). As foster care numbers continued to rise, Congress noticed a flawed child welfare system.

The problems identified by Congress are the foundations of child welfare reform policies. Concerns expressed were: placement in foster care before preventative services could be implemented that could possibly prevent foster care placement, placements were

too restrictive and too far from the child's original home, lack of written case plans and periodic case reviews, parents were not aware of their child's situation once they were in care, missing reunification services, creation of unnecessary barriers to adoption, and a lack of data on children in the system (Administration for Children and Families, 2011). These concerns ultimately led to alterations of the law which included new protections and the requirement that states must make reasonable efforts to prevent placement into foster care and reunify children and their parents in cases where they were removed.

Authorized within the SSA, Title IV-E was developed to provide safe and stable out-of-home placements to children. Title IV-E is an annually appropriated program with specific eligibility requirements and fixed allowable uses of funding. Funding is awarded to states as an open-ended entitlement grant (Social Security Administration, 2011). States receiving such funding, must submit yearly estimates of program expenditures in addition to quarterly reports of estimated and actual program expenses to justify funds received by the state. Funding is used as maintenance payments for the care and supervision of eligible children in foster and adoptive home settings.

Aside from maintenance payments, Title IV-E funds are used for indirect child welfare activities such as: administrative costs, training child welfare staff and foster parents, foster parent recruitment, and most importantly the development and implementation of a state-wide data collection system (Administration for Children and Families, 2011). With states pulling government funding, it is important to have a system of checks and balances in place. These checks are conducted by the Children's Bureau periodically to ensure federal dollars are utilized for intended purposes. These reviews

are known as Child and Family Service Reviews (CFSRs) which consist of three important phases.

Developed in 2000, the three phases of the CFSR are: each state engages in a comprehensive self-assessment of its child welfare system and submits their findings to the Department of Health and Human Services (DHHS), in the second phase DHHS conducts an onsite assessment of each state involving three sites within the state. This assessment combines reviews of child welfare foster care and in-home services cases and interviews or focus groups. In the final phase, each state must develop a Program Improvement Plan (PIP) which addresses areas needing improvement as a result of the assessment in the second phase (U.S. Department of Health and Human Services, 2012). In 2001, the first review was facilitated, but states did not participate in all three phases. Georgia and 16 other states participated in the first two phases of the review. By 2004, all states including Puerto Rico and the District of Columbia participated in the first two phases of the CSFR (U. S. Department of Health and Human Services, 2012).

The reviews assess how well each state is meeting the needs of the children served and how well they meet systemic requirements. States are attempting compliance in 14 areas; 7 are related to the needs of children, more specifically; safety, permanency, and well-being, and the final 7 are affiliated with system requirements (Bruskas, 2008). The CFSR conducted in March 2004, produced disappointing results. Bruskas (2008) writes Puerto Rico, Washington, DC and all of the 50 states, failed to meet child welfare standards. No state met the federal requirements of providing permanency and stability for children in care. The second round of testing lasted from 2007 through 2010.

Amended once again in 1985, SSA focused on helping teens ages 16 and older make the transition to independent living. Funding for the Independent Living Program (ILP) was restricted to Title IV-E eligible teens (Administration for Children and Families, 2011). Subpart 2 of Title IV-B surfaced in 1993, when the government placed a cap on entitlement funds for family preservation and family support services. By 2000, IV-E provided 48% of federal expenditures towards child welfare services. As part of Title IV-E of the Social Security Act, states were reimbursed for a percentage of costs relating to out-of-home care. These costs, however, did not cover preventative or rehabilitative expenses such as counseling or substance abuse treatments (Bass, et al. 2004). These preventative services fall under Title IV-B.

According to a 2003 report by the General Accounting Office, Title IV-B is the primary source of federal funding for preventative services that help families address problems that lead to child abuse and neglect and to prevent unnecessary separation of children from their families. Consisting of two parts, subpart 1 and 2, Title IV-B subpart 1 is known as the Stephanie Tubbs Jones Child Welfare Services. Subpart 1 provides grants to states and Indian Tribes for programs aimed at keeping families together (Administration for Children and Families, 2011). With prevention as the main focus, subpart 1 of SSA maintains the objective of keeping children with families if possible, if children are placed in care, the goal is to provide reunification services. Families are eligible for subpart 1 regardless of income.

Combined with state and local government funds, Title IV-B subpart 1 seeks to accomplish the following: protect and promote the welfare of all children, prevent neglect and abuse, provide support to at-risk families through prevention services,

promote safety, permanence, and well-being of children in foster and adoptive placements and finally, provide training, professional development and support to ensure qualified child welfare workers (Administration for Children and Families, 2011). In 1993, Congress established the Family Preservation and Family Support Program under subpart 2 which was later re-authorized in 1997 under the Adoption and Safe Families Act and re-named, Promoting Safe and Stable Families.

In 1997, through the enactment of ASFA, permanency for children in foster care became the center of attention. New provisions included new timelines for moving children to permanency, adjustments to reasonable efforts standards now asked state programs to specify that the child's safety and health is paramount to other concerns when deciding the placement of a child, and the creation of adoption incentive bonuses to states that increased the number of adoptions from the foster care system (Administration for Children and Families, 2011). The law also reauthorized the Family Preservation and Family Support Program, re-named it the Promoting Safe and Stable Families (PSSF), and continued the child welfare demonstration waivers.

More recently, reformers within the Casey Foundation issued a report and have called for reauthorization and expansion of Title IV-E. A much improved balance among family support services, services to extended family caregivers and foster care services can be financed from IV-E dollars in states experiencing large declines in foster care populations. Title IV-E waivers provide an opportunity to rigorously evaluate new reform strategies and approaches to comprehensive finance reform (Casey Family Programs, 2010).

Adoption Assistance and Child Welfare Act of 1980 (P.L. 96-272)

Prior to 1974, the government's role in child abuse was minor. In fact, Alexander and Alexander (1995) report that foster care policy before 1980 was often criticized by advocacy groups because they did not prevent separation or promote reunification. As amended in 1962, the SSA provided funding to expand child welfare services, but as noted by U.S. Senator Walter Mondale, there was no one within the federal government assigned full time to the prevention, identification, and treatment of child abuse and neglect (Myers, 2008). With this observation, Congress passed the Child Abuse Prevention and Treatment Act (CAPTA) of 1974. CAPTA presents an ecological approach to preventing, identifying, and treating child abuse and neglect by integrating the work of various agencies.

Under CAPTA the government authorized funds to improve the state response to physical abuse, neglect, and sexual abuse (CAPTA, 2003). This legislation paid special attention on efforts to improve investigations and reporting allegations of child abuse and neglect. Social problems along with the implementation of CAPTA and an increase in child abuse reporting awareness led to the removal of more children from their homes. Children entered care and remained for long periods of time or until they aged out, never achieving permanency. Foster care lag ultimately led to the enactment of new federal policy.

In 1980, Congress passed the Adoption Assistance and Child Welfare Act the first federal law which emphasized and helped remove large numbers of foster children's cases towards permanent legal outcomes (Davidson, 2008). At face value, this act was the government's attempt to encourage states to shift foster care policies away from

removal only strategies, direct more attention on prevention, and in cases where removal is necessary, encourage permanency planning to increase reunification efforts or terminate parental rights and freeing the child(ren) up for adoption. This law is based on the assumption that foster care is a temporary security. This concept was re-conceptualized from an earlier caretaking system.

As outlined in a 2005 report to Congress on Adoption and Other Permanency Outcomes for Children in Foster Care, four major provisions of Public Law 96-272 are: states must make reasonable efforts to prevent the removal of children from their homes and reunify children already in care, children in foster care must be placed in the least restrictive environment, states are required to make adoption assistance payments available to families who adopt children with special needs if these children meet the eligibility requirements of AFDC, and finally this legislation served as the foundation for states to define special needs so as to include diagnosed disabilities, members of a sibling group, racial or ethnic minority states and age.

Every effort should be made by states to prevent the removal of children or encourage reunification through social service programs or find permanent adoptive homes (Sheldon, 1997). To achieve this goal, the Adoption Assistance and Child Welfare Act (AACWA) established criteria that child welfare agencies must meet in order to receive federal funding (Raymond, 1999). Monies for foster care and adoption assistance were authorized within the SSA. Public Law 96-272 developed part E under Title IV (Davidson, 2008). Failure to follow guidelines expressed in AACWA resulted in states not receiving funding for foster care and adoption assistance. Reimbursement required states to make reasonable efforts to prevent the removal of children from their families.

Reasonable efforts provision is one that has caused great debate over defining reasonable efforts and was a precursor to judicial involvement in the enforcement of this act. Mandating reasonable efforts was the government's way of tempting states with the promise of federal dollars if they focus on prevention and reunification (Alexander & Alexander, 1995). Effective October 1983, whether reasonable efforts were made by caseworkers was decided in family court. When determining reasonable efforts, the court is deciding whether or not efforts were made to prevent or eliminate the need for removal of the youth prior to foster care placement (Klein, 1997). These services included but were not limited to the following: individual and family counseling, emergency shelter placement, daycare, self-help groups, and mental health counseling.

Enforcement of AACWA for those states that failed to comply was visible with the elimination or reduction in government funding for foster care and adoption assistance. Compliance was compelled by family court judges who would subpoena caseworkers to testify about their reasonable efforts. Alexander and Alexander (1995) purports that within this law, the courts could also: order that agencies not be reimbursed, order specific services be provided, hold child welfare agencies in contempt for failure to comply, and order agencies write a report and submit to state and federal entities as to why reasonable efforts were not made.

With hopes of achieving the permanency goal of adoption, P.L. 96-272, created the first federal incentive directed towards families who provide homes for foster children through adoption. AACWA amended section IV-E of the Social Security Act and sanctioned monthly adoption assistance payments to those families that adopted children classified as having special needs (Hansen, 2007). To free children up for

adoption quickly, the law stated that a special dispositional hearing was required no later than 18 months after foster care entry (Davidson, 2008). Upon court review of the case and case plan, the following options were decided: reunification with the family if appropriate, continue foster care stay, or termination of parental rights therefore freeing up the child for adoption.

The overarching goals of AACWA was to preserve families, increase reunification for those in care, and promote adoption by shortening the timeframes required to terminate parental rights. Congress hoped that for those children who could not return home, the numbers in care would decrease due to the adoption incentives, but just the opposite occurred. Martin Guggenheim (2000), Professor of Clinical Law at New York University studied foster care populations for New York and Michigan following the implementation of 96-272. In Michigan from 1986 to 1992, the state experienced a 73% growth in the amount of children in care. Guggenheim noted that approximately 1,600 were entering care and the adoption rate held steady at 1,200 per year. By the year 2000, the study estimated that of the 400 children entering care annually, there were about 5,000 children waiting to be adopted (Sheldon, 1997). So even though parental rights are being terminated, children are still not establishing the law's goal of permanency. The same study held in New York from 1987-1991 yielded an increase in foster care numbers. Termination of parental rights increased by 86%, the rate of adoption increased by 96%, but children entering care increased by 225%.

The etiology of current foster care case plans is found within this law. Under 96-272, states were directed to enact policies which required caseworkers develop case plans for each child on their caseload. These plans must be written documents accessible

to parents. Plans had to be developed prior to 60 days and had to include documentation of how the plan was designed to achieve placement in the least restrictive setting close to the child's home. Finally, after 1983, all case plans had to list all of the services provided to prevent removal of the child and reunify the family (Alexander & Alexander, 1995). The last case plan requirement corresponded directly to the reasonable effort mandate.

To hold states accountable for the implementation of this law, it was important for states to develop a statewide tracking system in which they would enter foster care data. Prior to AACWA, states had no way of accurately tracking the children in care. This provision required states to conduct an inventory of the children in care dating back six months. This inventory would allow agencies to assess the appropriateness and necessity of current foster care placements (Davidson, 2008). Reporting foster child statistical information was not mandatory initially, but those states that elected to implement Statewide Automated Child Welfare Information Systems (SACWIS) in 1993, received additional funding under Title IV-E.

SACWIS systems are a comprehensive automated case management tool that meets the case management needs of all foster care and adoption assistance workers (U.S. Department of Health and Human Services, 2011). Reporting foster care statistical information to the federal government became mandatory in 1994 through the Adoption and Foster Care Analysis Reporting System (AFCARS). AFCARS collects case level information on all children in the custody of the state. The Administration on Children and Families (ACF) then compiles AFCARS data for numerous reasons including: Child Welfare Outcomes Report, Child and Family Service Reviews, Title IV-E Eligibility

Reviews, and allotment of funds in the Chafee Foster Care Independence Program (U. S. Department of Health and Human Services, 2011).

With the implementation of AACWA in full-effect, it was expected that the number of children in foster care would decrease and they did initially, but by the end of the 80's the foster care census rose to over 500,000 (Doyle, 2007). A key component of AACWA is the preservation of families. Beginning in 90's, critics argued against this over reliance of family preservation as it sometimes lead to the death of a child (Myers, 2008). Connecting the shifting perceptions on family preservation along with the crack cocaine, HIV/AIDS epidemic, incarceration and homelessness serving as factors that prevented a large number of parents from providing adequate care for their children (Bass, et al., 2004). Foster care numbers were on the rise. As a means of addressing this problem, Congress enhanced the Adoption Assistance and Child Welfare Act by passing the Adoption and Safe Families Act.

Adoption and Safe Families Act of 1997(P.L. 105-89)

With concerns over adoption statistics, prior to the passage of ASFA, in 1996, Congress held hearings which focused on adoption barriers. Obstacles to adoption included: the need to move children more quickly out of foster care and into an adoptive family (Barriers to Adoption, 1996). Testimony from the Honorable George Miller, Lieutenant Governor of Michigan Connie Binsfeld, and Congressman Harris E. Fawell purport children remaining in care too long and site a flawed adoption system. In 1997 AACWA was amended by ASFA and greater emphasis was placed on permanency planning and adoption. Driven by the substantial growth in the foster care population and

continuing issues within the child welfare system, passage of the Adoption and Safe Families Act was an important piece of legislation since 1980. The intent of ASFA was to decrease the time that foster children remained in care, increase adoptions and other permanency alternatives, and develop performance measures to increase accountability among states (Chipungu & Goodley, 2004).

Child welfare went from a prevention paradigm in the 80's to one focusing on child safety, but still acknowledging family preservation. There are six key components of ASFA focusing on reauthorizing previous programs, safety, permanency, adoption promotion, accountability, and defining reasonable efforts. Public Law 105-89 reauthorized the Family Preservation and Support Services Program of 1993 and renamed it the Safe and Stable Families Program. Authorized under Title IV-B Subpart 2 of the SSA, this program is a combination of a capped entitlement program and a discretionary grant program. The purpose of the Safe and Stable Families Program is to enable each state to facilitate a coordinated program of family preservation services and community based support services (Department of Health and Human Services, 2011). Upon reauthorization, services were expanded to include time-limited reunification services and adoption promotion support services.

Furthering the gains of 96-272, ASFA emphasizes the child's safety as a paramount concern (Child Welfare Information Gateway, 2010). Under this act, health and safety concerns are address when the state determines placement into foster care is necessary. The safety of the child is added is acknowledged within every aspect case plan development and review. Finally, as an additional requirement stressing safety, all foster

and adoptive parents receiving federal funds on behalf of their child were required to undergo a criminal records check (Child Welfare Information Gateway, 2010).

The Adoption and Safe Families Act seeks to accelerate permanency for children in care. This was attempted by changing the time frame for dispositional reviews otherwise known as permanency planning hearings. The purpose of a permanency hearing is to determine the permanency goals of the child, assess whether the goals will be achieved or if modification is in the best interest of the child (Guardian Adlitem, 2011). States are required to initiate permanency hearings to free a child for adoption once a child has been in care for at least 15 of the most recent 22 months.

With the unveiling of ASFA in 1997, the child welfare now viewed adoption as a permanency outcome for children in care who will not return home to their biological families. Children waiting to be adopted have historically remained in care for longer lengths of stay in comparison to children with reunification as a permanency goal. An analysis of reunification and adoption trends dating back to 1990, indicate that the rate children exiting care to reunify with families and not adoption slowed during the 1990's (Wulczyn, 2004). This is significant data because Congress in part enacted ASFA to address the perceived sluggish adoption process. Nevertheless, a study of 20 states in 1991 found that children remained in care an average of 3.5-5.5 years when they were waiting to be adopted (Sullivan & Freundlich, 1999).

As shown in the 2010 AFCARS report, 25% of the child welfare population has adoption listed as a permanency goal and are averaging a length of stay of 2 years or longer (Administration for Children and Families, 2010). Georgia's adoption statistics falls in line with the national average. Almost 80% of children waiting to be adopted

have been in care longer than 2 years (Center for Law and Social Policy, 2010).

Adoptions were promoted under AACWA however; ASFA went a step further in authorizing states to make additional efforts in promoting adoption. States that increased their adoption rate received federal dollars as an incentive.

Children in care with special needs often receive a host of services ranging from mental health to medical support. The state through Medicaid is responsible for funding these services. Parents define special needs as children who are older, part of a sibling group, of a different race, or who have mental or physical challenges (Molinari & Freeborn, 2006). With this broad definition, one could assume that the majority of children in care could possibly bear a special needs label. In fact in 2005, 89% of the families that adopted children received the special needs adoption subsidy (Wind, Brooks & Barth, 2007). With additional monetary support, it was assumed that the adoption rate would increase.

Prior to ASFA, children could not be placed more than 50 miles from their original homes. To promote the permanency outcome of adoption, states were prohibited from delaying or denying placements of children based on the geographic location of prospective adoptive parents (Child Welfare Information Gateway, 2011). Due to the reasonable efforts mandate, adoption caseworkers had to document all of their efforts to find homes for children. Before the enactment of AACWA in 1980, states had no way of identifying who was in care. A national tracking system was obsolete therefore obtaining statistically data and holding states accountable for children in foster care was impossible. To address this shortfall, Congress amended Title IV-E in 1986 by adding section 479. Under this section, the federal government was responsible for instituting a

foster care and adoption data collection system. If successful, this data system would capture the required data. However, most states did not have child welfare information systems to meet specific AFCARS requirements. In 1993, the Omnibus Budget Reconciliation Act was passed, which provided federal financial participation at a 75% rate for the implementation of SACWIS (Omnibus Budget Reconciliation Act, P.L. No. 103-66, 1993).

Once put into action, SACWIS became the tracking tool states used to identify all children in care, case plan due dates, court dates, reports pertaining to the child were all held within this system. In theory, SACWIS is the ideal tracking tool, but states are not required to utilize SACWIS. There are currently 13 states (Puerto Rico included) that do not enter data into SACWIS. California, Michigan, and Louisiana are in the developing stages of their SACWIS systems (Administration for Children and Families, 2011).

As the fifth provision states, 105-89 promoted accountability in child welfare. Under this provision, Health and Human Services were required to develop new outcome measures (including length of stay) that could be used to monitor and improve state child welfare performance. Written in ASFA, outcomes should be derived from AFCARS and mandates the submission of an Annual Report to Congress on state specific outcomes (Courtney, Needell & Wulczyn, 2004). This provision is often critiqued for the ways in which data is collected. Courtney et al. (2004) have expressed that performance measure should not be based on data from point-in-time cross-sections of the population or from ex-cohorts. Both samples create bias meaning children entering care do not have an equal probability of appearing in the observed sample.

The final provision and most debated in courts of law and within child advocacy groups, ASFA clarified reasonable efforts. When Congress passed the Adoption Assistance and Safe Families Act of 1980, a key component of child welfare reform included the provision of states making reasonable efforts to keep families together before placing children into care or reunify families once children entered care. However, the nature and scope of reasonable efforts was never defined by Congress. By the mid 90's, some state's interpretations of the law was so vigorous that children were at times harmed or killed by parents who received services which included supports to maintain children in the home (Berrick, Choi, D'Andrade, & Frame, 2008).

To correct this ambitious approach to providing reasonable efforts, Congress included revisions within ASFA which allowed states to bypass reunification services to families who had extreme cases of abuse or neglect (Berrick, et al., 2008). Going a step further, ASFA outlined five instances in which states are not required to make reasonable efforts to preserve or reunify a family. Child welfare systems are not required to make reasonable efforts if: a parent has committed murder against another birth child, committed involuntary manslaughter of a birth child, aided or abetted, attempted, conspired, or solicited to commit murder or involuntary manslaughter of another birth child, has their parental rights terminated involuntary or has committed a felony assault resulting in bodily injury of their birth child (Berrick, et al. 2008). As stated within the law, reasonable efforts are not required if the court deems that a parent has subjected a child to abandonment, torture, chronic abuse, and sexual abuse (ASFA, Title 1, Section 101). This clarification of reasonable efforts led some to believe caused an increase in child placement statistics.

Kenny A. Consent Decree

In 1988, the American Civil Liberties Union filed a class action lawsuit against the Illinois Department and Children and Family Services (DCFS) on behalf of a 17 year old youth and approximately 20,000 other youth living in foster care. Attorneys accused DCFS with violating Illinois statutes and the due process clause of the Fourteenth Amendment. The 17 year old youth was placed in an estimated 10 foster settings despite evidence suggesting that children require continuity of care for emotional growth. In Connecticut in 1998, the death of a 17 year old youth at the hands of his aunt became an issue when it was discovered that the placing agency received five separate abuse reports against the aunt (Gainsborough, 2009). New Jersey Division of Youth Services, already under a consent decree, faced additional scrutiny when a couple was arrested for starving four of their adopted children and the agency placed another child in the home (Gainsborough, 2009).

Cases such as those listed above created attention within the media that led to lawsuits and court-ordered reform within child welfare systems. Researchers have debated reform based on litigation and have questioned if change occurred due to litigation, legislature, or increased oversight by the federal government. This debate is what sparked interest in child welfare reform. Through qualitative surveys this study obtains the root cause of change within Georgia's foster care system from the perspectives of private foster care case managers. Currently under reform, it was questioned whether changes are in response to litigation, compliance with federal policies, or increased oversight by the federal government.

In 2002, the Children's Rights, Inc. of New York filed a class action lawsuit against the state of Georgia known as *Kenny A. vs. Sonny Perdue*. This lawsuit alleged violations of certain civil and statutory rights against foster children housed within Georgia's foster care system. Out of 159 counties in Georgia, Fulton and DeKalb Counties, the two largest counties in the state were named in the lawsuit. The lawsuit also alleged that DFCS placed children at risk by operating an overburdened and poorly managed child welfare system. Systemic issues reported in the complaint were: children are placed wherever there is a bed and not according to the child's needs and social workers with high caseloads prevented them from monitoring the safety of children in care. The lawsuit resulted in the *Kenny A. Consent Decree* in 2005. After this lawsuit, the child welfare system in Georgia began implementing new strategies and the process of reform. It is important to note that changes did not occur within a bubble. Reform within DFCS created a trickle down effect to the private sector. Because foster children are placed in agencies outside the realm of DFCS, these agencies had to reform too.

The lawsuit requires the defendants, DFCS, to make systems changes and comply with 31 specific measures. The system improvements are divided into eleven areas: planning for permanency, placement of children, health services, Statewide Automated Child Welfare Information Systems (SACWIS), caseloads, supervision of contract agencies (private providers), training, foster parent training, screening and licensing, investigating allegations of abuse while in care, corrective action plans, and maximization of federal funding (Barton Child Law & Policy Center, 2008). Interestingly enough, some of these standards were new practices for case managers and administrators, but others were existing policy and practice requirements. In reviewing

the performance measures, many correspond directly to provisions within federal foster care policies.

In order to be released from the consent decree, Georgia must maintain compliance with all measures simultaneously for three consecutive reporting periods and a motion to terminate jurisdiction must be approved by the court. Each reporting period runs from January 1 to July 1 of each year. The first reporting period began in October 2005. In the first three reporting periods, Georgia failed to meet the required measures, (see Table 1).

Table 1. Compliance Percentages for the first three reporting periods

Kenny A. Consent Decree Reporting Periods	1 st Reporting Period	2 nd Reporting Period	3 rd Reporting Period
Total Items required to be reported on	7	25	25
# of items in compliance	2	11	8
Percentage	29%	44%	32%

Since the initiation of the consent decree and throughout the years, Georgia has undergone significant gains in the areas of safety, permanency, and well-being. Results from the fourth reporting period cited less children entering care in Fulton and DeKalb. The re-entry rate into foster care within 12 months amounted to 9%. This is higher than

the consent decree standard of 8.6%, but is a slight improvement from 9.6% to 9.2%.

With respect to permanency, nearly half (48%) of the children who were in care 12 months or less exited to reunification or to a kinship placement within the year. This statistic exceeded the consent decree standard of 45% (Kenny A. v Perdue fourth report, 2006).

These gains were not enough. In response to a federal review of Georgia's child welfare outcomes, Georgia developed a Program Improvement Plan (PIP), phase three of the CSFR. This plan was approved by the federal Children's Bureau of the Administration on Children and Families and became effective in 2008. The PIP forced Georgia in the direction of improving permanency outcomes for children in foster care. This push resulted in new initiatives and pilot programs all directed at increasing permanency and compliance with the consent decree. DFCS holds to a new vision of creating stronger families for a stronger Georgia, a new mission of strengthening Georgia by providing individuals and families' access to services that promote self-sufficiency, independence, and protect Georgia's vulnerable children and adults. Finally, DFCS is operating under a new set of core values of providing access to resources that offer support and empower Georgians and their families, professional service delivery, promote accountability, transparency, and quality in all services (Georgia Department of Health and Human Services, 2011).

Georgia's child welfare reform consisted of four strategies. The first was to develop a Family-Centered Practice Model (FCPM). This model utilizes Family Team Meetings as a way to engage and assess the family and as a case planning tool. Through training, in 2009, the goal was to incorporate this practice within both the private and

public sectors of child welfare. The last goal under the first strategy required promoting placement stability and permanency through caseworker-child visits known as Every Child Every Month (ECEM) visits (Georgia Department of Human Resources, 2009). The second strategy was to strengthen policy and improve practice to ensure the safety of children in care. Goals included implementing a quality intake screening tool, assess risk and safety on an ongoing basis and improve documentation skills through increased training (Georgia Department of Human Resources, 2009). This strategy of improving screening and assessment tools presents a link to the Ecological Perspective with respect to proper permanency planning. Strategy three, addresses the issue of permanency. A goal within Georgia's child welfare system is to improve permanency outcomes for children and families by supporting the Court Improvement Project (CIP) which reviews all abuse and neglect cases, addresses problems of permanency through case review, and partners with federal and state agencies to improve permanency outcomes by tracking court permanency hearings (Georgia Department of Human Resources, 2009).

The state focused a great deal of effort on meeting the permanency outcomes within the consent decree. Partnering with the Casey Family Foundation, permanency roundtables were developed. This was a process of DFCS workers meeting amongst themselves for brainstorming sessions to develop ways to increase permanency for children in care. What was missing from these roundtables was input from private providers who provide foster services to the majority of children in care. In Georgia, more than 40% of the foster care populations are housed in the private care section (Georgia Department of Human Services, 2011). The fourth and final strategy sought to

improve services for family members to meet family specific needs by regular and ongoing case reviews.

After acceptance of the proposed PIP, Georgia began the arduous practice of reform which produced significant results within the tenth and most recent reporting period. It is important to first note that the number of active Child Protective Services (CPS) cases, has been on a steady decline by 61 percent from state fiscal year 2004 to state fiscal year 2008. Within the same time frame, the rate of recurrence of substantiated maltreatment cases the recurrence decreased from 9% to 3% (DFCS Evaluating and Reporting Unit, 2009). Since 2004, the number of children entering care has decreased by 42% annually since 2005. In sum, there have been more children leaving care than entering care. The current reporting period documented Georgia's sustained performance in a number of categories and constant improvement in other areas.

The Kenny A Monitoring Report for Period 11 (2011) recognizes the progress Georgia has made towards compliance with the consent decree. Table 2 presented below is a synopsis of the progress and areas of improvement for Georgia within the consent decree.

Table 2. Kenny A. Outcomes: Progress as of June 30, 2011

Safety Outcomes	Period 11 Performance	Comparison to Period 10
Children in Foster Care are Safe from Maltreatment in Care		
Outcome 5: No more than 0.57% of all children in foster care shall be the victim of substantiated maltreatment while in foster care.	0.41%	Similar
Permanency Outcomes	Period 11 Performance	Comparison to Period 10
Children in Placements Maintain Family Connections		
Outcome 7: At least 95% of all foster children entering care shall have had a diligent search for parents and relatives undertaken and documented within 60 days of entering foster care.	95%	Similar
Outcome 16: At least 80% of all foster children who entered foster care during the reporting period along with one or more siblings shall be placed with all of their siblings.	74%	Declined
Outcome 19: 90% of all children in care shall be placed in their own county (the county from which they were removed) or within a 50 mile radius of the home from which they were removed, subject to the exceptions in Paragraph 5.C.4.b (ii) and (iii).	99%	Similar
Outcome 21: At least 85% of all children with the goal of reunification shall have appropriate visitation with their parents to progress towards reunification.	89%	Similar

Table 2 (continued)

Permanency Outcomes	Period 11 Performance	Comparison to Period 10
Children in Placements Maintain Family Connections		
Outcome 23: At least 90% of the total minimum number of required monthly sibling-group visits shall have taken place during the reporting period. Children who have more siblings in custody with whom they are not placed shall be provided a visit with their siblings at least one time each month, unless the visit is harmful to one or more of the siblings, the sibling is placed out of state, or the distance between the siblings is more than 50 miles.	95%	Similar
Permanency Outcomes	Period 11 Performance	Comparison to Period 10
Children Achieve Permanency		
Outcome 8a: Of all the children entering custody following the entry of the Consent Decree, at least 40% shall have had one of the following permanency outcomes within 12 months or less after entering custody: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.	54%	Similar
Outcome 8b: Of all the children entering custody following the entry of the Consent Decree, at least 74% shall have had one of the following permanency outcomes within 12 months or less after entry: reunification, permanent placement with relatives, or shall	61%	Similar

Table 2 (continued)

Permanency Outcomes	Period 11 Performance	Comparison to Period 10
Children Achieve Permanency		
have had one of the following permanency outcomes within 24 months or less after entering: adoption, permanent legal custody, or guardianship.		
Outcome 9: Children in custody for up to 24 months and still in custody upon entry of the Consent Decree (children in the 24-month backlog pool): For all children remaining in the 24-month backlog pool after the third reporting period, at least 40% by the end of the fourth reporting period shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.	27%	Improved
Outcome 10: Children in custody for more than 24 months and still in custody upon entry of the Consent Decree: For all children remaining in the over 24-month backlog pool after the third reporting period, at least 35% by the end of the fourth reporting period shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.	9%	Declined
Outcome 11: For all children whose parental rights have been terminated or released during the reporting period, 80% will have adoptions or legal guardianships finalized within 12 months of final termination or release of parental rights.	67%	Improved

Table 2 (continued)

Permanency Outcomes	Period 11 Performance	Comparison to Period 10
Children Achieve Permanency		
Outcome 12: For children whose parental rights have been terminated or released and the child has an identified adoptive or legal guardian resource at the time of the entry of the Consent Decree, 90% shall have had their adoptions or legal guardianships finalized within six months after the entry of the Consent Decree.	94%	One time measure taken in Period I N/A
Outcome 13: For all children for whom parental rights have been terminated or released at the time of entry of the Consent Decree, and the child does not have an identified adoptive resource, 95% shall have been registered on national, regional, and local adoption exchanges, and have an individualized adoption recruitment plan or plan for legal guardianship within 60 days of the Consent Decree.	30%	One time measure taken in Period I N/A
Outcome 15: Permanency efforts (15/22): At least 95% of all foster children who reached the point of being in state custody for 15 of the prior 22 months, shall have had either a petition for the termination of parental rights filed as to both parents or documented compelling reasons in the child's case record why termination of parental rights should not be filed.	100%	Similar
Outcome 27: At least 95% of foster children in custody for six months or more shall have either had their six-month case plan review completed by	87%	Declined with margin of error

Table 2 (continued)

Permanency Outcomes	Period 11 Performance	Comparison to Period 10
Children Achieve Permanency		
the Juvenile Court within six months of their prior case plan review, or DFCS shall have submitted the child's six-month case plan to the Juvenile Court and filed a motion requesting a six-month case plan review within 45 days of the expiration of the six-month period following the last review.		
Outcome 28: At least 95% of foster children in custody for 12 or more months shall have either had a permanency hearing held by the Juvenile Court within 12 months of the time the child entered foster care or had his or her last permanency hearing, or DFCS shall have submitted the documents required by the Juvenile Court for and requested a permanency hearing within 45 days of the expiration of the 12-month period following the time the child entered foster care or had his or her last permanency hearing.	93%	Declined with margin of error

Georgia demonstrated improvement within Outcome 11. At 67%, this is an improvement from 59% in Period 10 (Kenny A. v Perdue, tenth and eleventh report, 2011). Georgia did not improve in all areas, in fact, some scores declined from previous reporting periods. Outcome 16 requires 80% compliance. Georgia declined in this area. The eleventh reporting period score was 74% which was a sharp decline from 94% the

previous reporting period. Corresponding with the permanency provisions of federal policies, Georgia experienced success. For Outcome 9, the goal is to achieve permanency for children that have been in care for 24 months. Georgia improved to 27% from 24% (Kenny A. v Perdue, eleventh report, 2011). Thus far, in ten reporting periods, the tenth period was the first period where the state did not have a decline in performance in any outcome area. With respect to permanency, the state improved, but fell short of the standard measurements.

From the onset of Kenny A. in 2005, 75% of the children in care at that time achieved permanency. For those who have entered and remained in foster care longer than five years, permanency was achieved for 73% of this population. In accordance with federal policies that call for timely permanency after parental rights are terminated, the consent decree states that 80% of these children should achieve permanency within 12 months. Georgia fell short with 59%, but demonstrated improvement in this outcome (Kenny A. v Perdue, tenth report, 2011).

Permanency

Numerous scholars have added to the body of knowledge with their definitions of permanency. In the 80's, permanency was a phrase describing the instability and longevity of the child's experience within foster care (Fein, Maluccio, Hamilton, & Ward, 1983). Since that time and with the enactment of federal policies, permanency has evolved into a basic right for children in foster care. A child not achieving permanency was first brought to the attention of Americans and Congressmen after studies pointing out foster care drift were published. As a result, Congress enacted the Adoption

Assistance and Safe Families Act in 1980 where it was determined within the law that establishing permanent family relationships should be the goal for every child.

A report compiled by Casey Family Services and the Children's Defense Fund in 2006, added to the definition of permanency stating that permanency is having an enduring family relationship which is safe and meant to last a lifetime, is comprised of the same legal rights afforded regular families, and one that provides emotional, social, and spiritual well-being. Research points to poor outcomes for youth who age out of care and never establish permanency. Studies highlight that in comparison to youth that never enter care, youth who age out of care are more likely to experience homelessness, unemployment, teen pregnancy, involvement with the legal system, substance abuse, and mental health issues (Avery, 2009). Such research provides a strong evidence base in support of increased efforts to achieve permanency.

In an effort to assist foster children who age out of the system, the Independent Living Program of 1986 was implemented into law. This program provided federal funding for states to develop specific programs for older foster children aging out of foster care. In 1999, the act was amended as the John Chafee Foster Care Independence Program. This amendment resulted in an increase in federal funding given to states to provide transitional services and it extended eligibility for transitional assistance for former foster children up to age 21 (Bass, et al., 2004).

While specific services vary among states, all services provided are intended to assist emancipated youth with achieving independence. Examples of such services can include financial and housing assistance, tuition assistance, and Medicaid. Massinga and Pecora (2004) recommend states take additional measures to provide life skills training to

foster children at an earlier age to encourage them to think about life after they exit foster care. White, O'Brien, Pecora, English, Williams, and Phillips (2009) recommended that states provide employment programs and have a detailed transitional plan outlining supportive relationships (mentors), community connections, educational plans, physical and mental health assessments and life skills assessments. Overall, it is vital to evaluate the long-term effects that specific programs have on emancipated foster children. Collecting longitudinal data on Independent Living Program participants can determine best practices that can be further replicated.

Since inception, foster care was designed to be a temporary resource for children who could no longer live with their families. Over time, this temporary resource has become a long term or even permanent living situation for children that have not established a permanent connection. Beginning with the Adoption Assistance and Child Welfare Act of 1980 and through the enhancement of the Adoption and Safe Families Act of 1997, the importance of ensuring permanent placements with birth families or adoption continues to be the goal for all children in care. There are four main components of permanency which foster care case managers strive to achieve for children in care: reunification with the birth parent(s) or caregivers, adoption, kinship care, or guardianship.

The significance of the biological family along with the importance of parent-child attachment are what makes reunification with the family when possible, the primary goal when children enter care. Federal policy regarding permanency demonstrates this preference for reunification when possible. According to the 2010 AFCARS report, approximately 49% of the foster care population or 202,065 had reunification as their

goal (Administration on Children and Families, 2010). Within Georgia, 74% of the foster care population was reunified with birth parent(s) in 2010 (Center for Law and Social Policy, 2010).

The reunification preference is codified in law, more specifically within the court case of *Troxel v. Granville* (2000). It was reiterated that parents have the fundamental right to direct the care, custody, and control of their children and it is presumed that unless proven otherwise, parents will act in the best interest of their children (Wulczyn, 2004). Reunification with birth families is the primary goal also established within foster care policies.

The Indian Child Welfare Act of 1974 serves as the most favorable proponent for family preservation. Along with the increasing number of children being removed from their homes, there was also a widespread concern over the number of Native Americans being placed outside of their tribal communities. In 1974, the Indian Child Welfare Act (ICWA) was enacted by Congress. ICWA mandated that a child could not be removed without convincing evidence and parental rights could not be terminated without proof beyond a reasonable doubt (Wulczyn, 2004). Enacted in 1980, Public Law 96-272 requires foster care case managers to implement reasonable efforts to maintain children in their homes. Reasonable efforts included providing home based family preservation services. Finally, authorized in 1997, the Adoption and Safe Families Act created a shift in reunification services. Efforts were now placed on timely reunification with family or terminating parental rights within 12 months and freeing the child(ren) up for adoption.

As part of ASFA, case workers are required to create case plans for every child entering care. Concurrent case planning was developed with the goal of increasing

reunification between children and their parents. With concurrent planning in action, foster care case managers are working towards reunification, while at the same time developing an alternative permanency plan in the event reunification is not feasible (Katz, 1999). Developed in the 1980's in Washington, concurrent planning was designed for children expected to remain in foster care after the year 2000. This model combines intense family outreach, shortened timelines, and possible permanent foster care placement in the event reunification is not achieved (Katz, 1999). Evidence also suggests that youth want a say in planning for their permanency. In 2004, California enacted legislature which ensured no child leaves care without a lifelong connection to a committed adult (Assembly Bill 408). This same law directs social workers to ask children in care about the people who are important to them and include interventions within the case plan to maintain contact with the identified individuals (Bussiere, 2006).

Child welfare reform through federal policies have produced change within the system and opened up the door to adoption for many children and families, but older youth in care and African American youth are less likely to be adopted. In 2010, 25% of the foster care population had adoption as a case plan goal. This amounted to an estimated 55,684 children (Administration for Children and Families, 2010). Less than 25%, Georgia experienced 12% of the foster care population being adopted in 2010 (Center for Law and Social Policy, 2010). AACWA amended section IV-E of the SSA and authorized monthly assistance payments to families adopting children who have special needs. This law created the first federal incentive for families who adopt children (Hansen, 2007). Then with the enactment of ASFA, further gains were made with an

increase in adoption statistics. But a significant portion of the foster care population remained care prompting legislature to act.

Along with the increasing number of children being placed in foster care, findings have shown that minorities, specifically African Americans, disproportionally represent a large percentage of children in foster care. According to Bass, et al. (2004), minorities account for 55% of the overall foster care population, with African Americans being represented at three to five times of their rate in the general population. The study further found that the rate of Latino children being placed in foster care nearly doubled in the past decade. Chipungu and Goodley (2004) found that the disproportionate number of children of color placed in foster care was related to poverty and a lack of culturally-based community services.

In 2009, Georgia's foster care system was mainly comprised of African American children. There were 8,020 children in care in Georgia in 2009. Of this number, an estimated 3,800 children were African American. These children were found to stay in care for longer lengths of time and receive fewer visitations from parents and caseworkers. Thus in an effort to ensure permanency for children regardless of race or origin, the Multi-Ethnic Placement Act was enacted. The act, which was signed into law in 1994, sought to promote permanency by prohibiting states from discriminating or denying adoptions or foster care placements due to a child's race or ethnicity. The act also encouraged recruitment of foster parents from a variety of different ethnicities and backgrounds to reflect the diversity among children in foster care. It is important to note that, whenever possible, states are encouraged to consider a child's cultural and ethnical backgrounds when selecting a foster care placement or adoptive home.

Adoption barriers received Presidential attention in 2002 and 2008. In acknowledgment of adoption barriers, as part of ASFA President Clinton developed his adoption initiative 2002 which sought to double the number of adoptions of legally free children, including older youth in care by the year 2002 (Kemp, et al., 2002). In 1999, this initiative proved successful. Bonus awards of 20 million dollars were dispersed to 35 states that increased the number of children adopted from foster care. Additional efforts to improve incentives for adoption came in 2008 when President Bush signed P.L. 110-351, Fostering Connections to Success and Increasing Adoptions Act. Public Law 110-351 amends the SSA to extend and expand adoption incentives through 2013. This legislation created an option to provide kinship guardianship assistance payments and developed an option to extend eligibility for Title IV-E foster care, adoption assistance and kinship guardianship payments to age 21 (Fostering Connections to Success and Increasing Adoptions Act, Section. 101).

To further address the issue of older youth remaining in care, Congress enacted The Adoption Promotion Act of 2003 (P.L. 108-145). By all accounts, federal laws enacted in 1980 and 1997 were fulfilling their stated purpose of creating permanency outcomes for children in care, but there remained a category of older youth in foster care in which permanency remained obsolete. Between 1997 and 2002, adoptions increased nationwide by 64%. After ASFA was implemented, the adoption of children with special needs increased by 63%. In 2009, there were approximately 1700 children awaiting adoption (Adoption Promotion Act, 2003).

Nevertheless, 542,000 children remained in care. Of this number, 126,000 were eligible for adoption. To address this issue, Congress turned their attention to promoting

the adoption of older youth (Adoption Promotion Act, Section 2). Public Law 108-145 focused on achieving adoption for youth in care nine years old and older. Public Law 108-145 focused on achieving adoption for youth in care nine years old and older. Key provisions included: reauthorizing the Adoption Incentive program at the request of President Bush and bonus awards for the adoption of children ages 9 and older. States receive fiscal benefits when they are in compliance with P.L. 108-145. States are awarded \$4,000 for each child adopted aged 9 and older and an additional \$2,000 for each child classified as special needs (Adoption Promotion Act, 2003).

Family members' relying on other family members to provide for the care and well-being of their children is and has been a common practice for centuries. However, until the late 1980's and early 1990's, this practice was not recognized within foster care policy. By definition, kinship care is any living arrangement in which children do not live with either birth parent. Rather, the child(ren) are placed with a relative or someone with whom they've had a previous relationship with (Green, 2004). Currently, kin are the first placement option when children are placed in care.

Within federal law under Title IV-E, states must consider giving custody to an adult relative over a non-relative when trying to determine the best appropriate placement (Child Welfare Information Gateway, 2010). Nationally, 24% of the foster care population was placed in a kinship setting (Administration for Children and Families, 2010). This placement setting was second only to traditional foster home placements at 48%. Regardless of federal policies encouraging placing children with kin, states have broad discretion with limited guidance on how to make this system work. Every state has

developed policies about kinship foster care, but policies vary from state to state (Green, 2004).

When the rights of parents are terminated, the ties to their children are usually severed in the process. To promote permanency options for children, ASFA has revised the old standard of the 18 month permanency hearing to 12 months. During this time, it is usually determined whether the biological parent will regain custody of their child or lose their parental rights. If parents are unable to care for their children, but they don't want to sever ties, the permanency option is often legal guardianship. Caretakers are able to assume legal guardianship of a foster child without the termination of parental rights, but the child will not be free for adoption until parental rights are terminated (Child Information Gateway, 2010). There are two types of guardianship, subsidized and standby. Similar to kinship care, subsidized guardianship is a process in which a child is placed with a relative and the relative receives ongoing financial support. The ongoing subsidized guardianship helps eligible children remain with kin who would otherwise not be able to support them long-term (Bissell & Miller, 2004).

Children in foster care are considered a vulnerable population. With histories of maltreatment and enduring the additional trauma of foster care placement, some studies show that half of children in foster care may experience at least one or more mental disorders (Bruskas, 2008). In terms of achieving, special needs children are oftentimes hard to place into permanent settings. Subsidized guardianship could possibly increase permanency outcomes for children that are hard to place. Each state has different eligibility requirements, but most programs are designed for children in the child welfare systems that are difficult to place (Bissell & Miller, 2004).

Other eligibility requirements include: consideration of reunification and adoption. States must review the child's eligibility for these permanency outcomes prior to subsidized guardianship approval. Next, Bissell and Miller (2004) report that children ages 2-14 are mainly placed within this type of setting, all children must be in the custody of the state and all participants are classified as special needs therefore receiving Title IV-E funding. Standby guardianship involves the appointment of a future legal guardian for children whose parents may soon be unable to care for them due to illness or other life-threatening events (Child Welfare Information Gateway, 2010).

Conceptual Framework

This study explores foster care policies and the impact they have on permanency outcomes for children in private foster care in Georgia. For the purposes of this research, Attachment Theory as defined by Bowlby and Ainsworth, and the Ecological Perspective illustrated by Bronfenbrenner are used as the conceptual framework to explain the importance of the parent-child bond as it pertains to permanency and to develop an understanding of maltreatment from various societal and environmental perspectives. This awareness could possibly lead to better permanency planning leading up to shortened timeframes for reunification or other permanency options.

Attachment Theory

Attachment relationships, mainly those developed within the first three years of life create expectations and influence responses within relationships. As more and more children enter care and remain for extensive periods of time, the attachment bond between the parents is in jeopardy. Pioneering the concept of attachment in the 1940's,

John Bowlby defined attachment as the tendency of humans to form strong bonds to others and a way of explaining different forms of emotional distress and personality disturbance including anxiety, anger, depression, and emotional detachment to which are expressed in situations of loss or unwilling separation (McWey & Mullis, 2004). Bowlby identified two forms of attachment, secure and insecure. Secure attachments are indicative of parenting that is responsive and tuned it to the needs of an infant. Children, who are securely attached, perceive themselves as worthy of care and trust others. Often witnessed in foster children due to neglect and abuse, insecure attachment is a result of parents rejecting infants. Insecure attached youth tend to feel not worthy of care and believe others are not trustworthy and responsive to their needs (Frey, Cushing, Freundlich, & Brenner, 2008).

Another scholar that has enhanced attachment theory, Mary Ainsworth describes attachment as a behavioral system developed over time with implications for survival (McWey, 2000). Merging both perspectives, attachment is an important function humans experience with either positive or negative outcomes. Understanding both positive and negative aspects of attachment is important when working with foster children.

Historically, the number one permanency option for children placed in care has always been reunification with the birth family when possible. This preference is rooted within American traditions that afford parents rights which are protected by the constitution (Wulczyn, 2004). This philosophy sets up the framework within child welfare policy, one which is based on the belief that in most instances, children belong with their families, not in out of home settings. This belief system was the catalyst for child welfare reform

through legislation which pushed for increased permanency outcomes for children in foster care.

The enactment of landmark foster care legislation, the Adoption Assistance and Child Welfare Act in 1980 began the process of decreasing the number of children in care by either reunification or adoption. Next, federal policy which enhanced AACWA, the Adoption and Safe Families Act in 1997 required a reduction in the length of stay in care for foster children. This was achieved through terminating parental rights within 12 months and establishing concurrent planning. When reunification is a case goal, case plans may require that the parent maintain visitation with their child. It has been noted that a child's contact with their biological parents while in care is beneficial for the continued physical and emotional growth of the child, improve their overall emotional well-being, and decrease their time in foster care (McWey, et al., 2004).

McWey and others (2004) note that additional data indicates that continuing the parent-child attachment through visitation might lead to a sense of security for the child while in foster care and could possibly strengthen the child-foster parent bond. Not all families have reunification as a permanency goal due to its inappropriateness. For these cases, it would be beneficial for case managers to understand important attachment principles. Being cognizant of various aspects of attachment relationships can guide case workers towards developmentally and culturally sensitive practice. This awareness will also provide a foundation for recognizing problems in attachment relationships (Haight, Kagle, & Black, 2003).

Prior research indicated that foster children are likely to have an insecure attachment history with their biological parent(s) due to past histories of abuse, neglect,

rejection, and abandonment (Ponciano, 2010). With this knowledge, it is easy to assume that children entering care may have a difficult time forming secure attachments to foster caregivers. During the initial stages of attachment theory, it was believed that attachment was formed during infancy and remained the same. Recent work by Ainsworth suggests that attachment develops across the lifespan. A study which assessed long-term foster parents ability to provide a secure base to foster children who experienced maltreatment yielded results which supported Ainsworth's claim. Foster families that understood the maltreatment histories of children placed in their homes were able to offer sensitive care which resulted in youth developing a secure base and increased their self-esteem (Frey, et al., 2008).

As social workers, understanding the universal aspects of attachment relationships has several implications. Universal aspects of attachment include the development of a positive, affectionate bond between children and their primary caregivers which speaks to understanding cultural differences in parent-child attachment. Developmental characteristics refer to the ways in which children and caregivers negotiate separation. This awareness suggests criteria for understanding age-specific needs. Finally, variable aspects include the ways in which children handle stress. In comprehending attachment relationships, foster care case workers should advocate for policy and practice that supports visitation in reunification cases especially with infants (Haight, et al., 2003).

Next case workers should consider that primary attachments may occur within foster care. When young children enter care, primary attachments are formed in most

cases with foster parents. This should not reflect negatively on the birth parent. Foster care policy must support families the duration of the child's stay in foster care.

The Ecological Perspective

The Ecological Perspective emphasizes the multiple, interdependent ecologies, or environmental systems in which children develop (Harden, 2004). Understanding the environment surrounding foster children and their families could prove important during the permanency planning process. This model is important to the child welfare field because it recognizes the shared responsibility among individuals, families, and communities. This recognition enables case managers within the child welfare field to take a constructive approach to help families by identifying interventions on many levels.

Federal legislation enacted in 1997 calls for the development of family specific case plans. These plans should be developed with the family and incorporate recommendations that would increase positive family functioning obtained from detailed family assessments. When case managers are aware of the specific needs of families, they can provide appropriate services to strengthen the family, therefore decreasing a child's stay in foster care. Howe (1983) endorses an ecological approach to permanency planning which incorporates case managers making an assessment of the child's environment, and determining the causes of abuse. Rappaport (1977) makes the distinction between the use of ecological principles to understand the actions of individuals and also uses these principles to understand how total systems work, such as communities and social service programs.

Established by Bronfenbrenner, the Ecological Perspective is defined as interactions between the following systems: Microsystem, Mesosystem, Exosystem, Macrosystem, and Chronosystem. Each system depends on the contextual nature of the person's life and offers an ever growing diversity of options and sources of growth (Swick & Williams, 2006). The Microsystem serves as the means for a child to learn about the world. In this case the family serves as the child's Microsystem, offering him or her meaning about the world. This system consists of the child's immediate environment on a physical, social, and psychological level. This initial set of interrelations with family for the child is what they experience in terms of developing trust and mutuality (Piper, 1996). Often seen as a stressor in families, Swick and Williams (2006) regard the Exosystem as one consisting of close, intimate systems of our relations within our families that create our buffer and nest for being with each other.

Encompassing a larger system of beliefs, values and norms, the Macrosystems we live in influence what, how, when, and where we carry out our relations (Bronfenbrenner, 2005). These systems enable us to maintain our lives and our overall ways of functioning. As Garbarino (1992) notes, without a system of beliefs, services, and supports for families, children and their parents are open to great harm and deterioration. As humans, we need interactions and vehicles that connect us to the world and services outside of our Microsystem and Exosystems. With respect to the ecological perspective, this connection occurs via the Mesosystem. The real power of mesosystems is that they help connect two or more systems in which child, parent, and family live (Bronfenbrenner, 1979).

According to Swick and Williams (2006), mesosystems help move us beyond the dyad or two-party relation. Mesosystems are or should permeate our lives in every

dimension. In viewing this perspective from a child welfare point of view, interactions between adults and children are important. Pipher (1996) cautions that a community must become a concrete reality for young children and their parents. There must be loving adults beyond the parent who engage in caring ways with our children. Finally, Chronosystems refers specifically to the family, framing all of the dynamics of families in the historical context as it occurs within the different systems (Bronfenbrenner, 1989). An important aspect of permanency planning includes conducting accurate assessments of the family in order to provide individualized services. When workers obtain accurate family histories, interactions are better understood which makes service delivery more efficient.

Summary

Chapter II presented an extensive literature review focusing on the historical roots of foster care and foster care policy. This chapter provided an in-depth look into the onset of the Adoptions Assistance and Safe Families Act and the Adoption and Safe Families Act of 1997. Since the enactment of these two landmark legislations, the federal government has enacted numerous policies aimed at increasing permanency outcomes for children in care, and more specifically to meet the need of special populations in foster care. Special populations include children with special needs, children over the age of 9, and African American youth. Such policies are identified under their corresponding permanency outcome. Chapter II also described the foster care system in Georgia and current reform beginning in 2005 with the Kenny A. Consent Decree. The chapter ended

with a presentation of Attachment Theory and the Ecological Perspective which comprises the theoretical framework.

Chapter III, Methodology, will include a description of the research design employed within this study as well as provide a description of Neighbor To Family, the facility from which the sample was derived from. Finally, the chapter will end with a description of the instrumentation, treatment of data and present the limitations of the study.

CHAPTER III

METHODOLOGY

This study explores the impact foster care policies have on permanency outcomes for children in private foster care in Georgia. Generally speaking, mixed methods research is an approach to knowledge the attempts to consider multiple viewpoints, perspectives, positions, and standpoints (Johnson, Onwuegbuzie, & Turner, 2007). A Mixed Methods Triangulation Design, inclusive of both qualitative and quantitative measures, is used to explore the research questions. According to Creswell and Clark (2007), the triangulation design is utilized to obtain different, but complimentary data on the same subject to gain a better understanding of the research problem. This chapter identifies the research methods exercised in gathering data to answer the research questions and presents a discussion centered on the appropriateness of the research design. Finally, this chapter describes the sample and data collection procedures and limitations of this study.

Research Design

Different research designs are implemented to answer different research questions. The aim of a single research design such as a quantitative study is to determine the relationship between the independent and dependent variable(s). These studies are either descriptive or experimental in nature. The quantitative approach begins with a

hypothesis and statistical methods are implemented to analyze the findings and will ultimately prove or disprove the hypothesis (Newman & Benz, 1998). Quantitative studies involve data collection through the use of close-ended question surveys, questionnaires, and checklists. After data is collected, it is then analyzed statistically (Creswell & Clark, 2007).

As defined by Whitley and Crawford (2005), qualitative research is a broad term that describes several methods of collecting and analyzing nonmathematical data. When researchers utilize qualitative designs, they are attempting to gain deeper insight into specific phenomena. This insight would otherwise go unnoticed in quantitative designs. This is accomplished through the use of surveys with open-ended questions, interviews, observation, gathering personal documents, or collecting video tapes (Creswell & Clark, 2007). In addition, analyzing and interpreting qualitative data involves placing words into categories and identifying common themes in presenting the data collected.

Mixed methods research is a way of collecting and analyzing both qualitative and quantitative data within the same study. Incorporating a mixed research design consists of looking at the research problem from two perspectives. Johnson and Onwuegbuzie (2004) define mixed methods research as one in which the researcher combines qualitative and quantitative research techniques, methods, approaches, concepts or language into a single study. Mixed methods research also known as the third paradigm, is a design with philosophical assumptions and methods of inquiry. Creswell and Clark (2007) note, as a methodology, it involves philosophical assumptions which are used to guide the direction and analysis of data. As a method, the focus is on collecting, analyzing, and mixing both qualitative and quantitative data in a single study.

The mixed methods approach has come under scrutiny from supporters encouraging the use of single designs. Researchers from qualitative or quantitative schools of thought often find grounds for their arguments in the incompatibility thesis. Howe (1993) presents the positivism and interpretivism paradigms as conflicting. Positivism is the view that scientific knowledge must not include metaphysics and results should be based on observation alone, observation free from the interests and values of the researcher. Interpretivism takes on the characteristics of qualitative designs and incorporates human intent and does not eliminate the beliefs of the researcher or the subjects. Mixed methods designs are not utilized as a superior research design in comparison to qualitative and quantitative designs. Instead it draws from the strengths and decreases the weaknesses of both in single research designs (Johnson et al. 2004).

There are four types of mixed methods designs. They are: Triangulation, Embedded, Explanatory, and Exploratory Designs. Due to increasing complexities of social problems, to fully understand the true nature of the social issue the study calls for investigation on more than one level. When looking at permanency issues within the child welfare system, there may be numerous factors affecting permanency outcomes that would remain hidden in a single design quantitative study. To fully comprehend permanency phenomena and factors affecting permanency outcomes, it was important to explore the topic from a mixed methods perspective.

The Triangulation Design is the most common approach utilized by researchers when mixing methods. This design combines the different strengths and weaknesses of quantitative methods with qualitative methods. The Triangulation Design is widely implemented when researchers want to directly compare and contrast quantitative results

with qualitative findings or in expansion of quantitative data. This ability to compare and contrast data was the reason for employing this mixed methods procedure within this study.

Mixing qualitative and quantitative data occurs in three ways: merging or converging the two datasets, connecting the datasets by building upon one another, and finally, one dataset can be embedded within another which results in one dataset supporting another (Creswell & Clark 2007). This mixture is necessary when trying to present a complete picture of the phenomena studied. Within the study on the impact foster care policies have on permanency outcomes for children in private foster care in Georgia, quantitative data was collected using the self-designed Length of Stay Questionnaire. This questionnaire consisted of six closed ended questions which captured demographic information, foster care placement reason, length of stay data, and permanency outcomes. Qualitative data was collected by issuing the self-designed Private Georgia Foster Care Case Manager Survey. This twenty (20) item open-ended survey obtained demographic data on ten (10) foster care case managers and assessed their awareness of foster care policies and factors affecting permanency outcomes.

Authors Creswell and Clark (2007), regard the Triangulation Design as a one-phase design in which the researcher implements the quantitative and qualitative methods during the same timeframe, both with equal weight. Collecting qualitative and quantitative data concurrently allows the researcher to better understand the problem. This design was adopted within this foster care study for two reasons. The first, the quantitative data is still testable statistically for significance and validity. This adds to the strength of the study and design.

Secondly, collecting the perceptions of foster care case managers provides depth into the concept of permanency. Incorporating these beliefs into the study provides the study with factors affecting permanency outcomes that are unnoticeable in the quantitative data results.

There are variations within the Triangulation Design. The act of collecting, mixing, comparing, and contrasting data falls within the convergence model of the Triangulation Design (Creswell & Clark, 2007). This method is utilized when researchers want to compare results or validate, confirm, or corroborate quantitative results with qualitative findings. It was hypothesized that there would be a statistically significant relationship between the independent variables of Group 1 and Group 2. To further contrast or corroborate the quantitative findings, qualitative data was collected.

Appropriateness of the Research Design

This study incorporates a Mixed Methods Triangulation Design: Convergence Model in order to explore factors affecting permanency outcomes for foster care children within Neighbor To Family, a private foster care agency in Georgia. This design was chosen because it allows the researcher to compare and contrast the data that is obtained from quantitative surveys and qualitative questionnaires.

The research questions are attempting to understand the relationship between federal foster care policies and permanency outcomes. The qualitative portion of this study sought feedback from foster care case managers within the agency to ascertain their perceptions of factors contributing to an increase or decrease in permanency outcomes for foster care children. The triangulation of the research design, allows the researcher to

collect data from the surveys and questionnaires, analyze the findings, compare and contrast the case manager's perceptions with the quantitative data and finally interpret findings from both sources (see Figure 1).

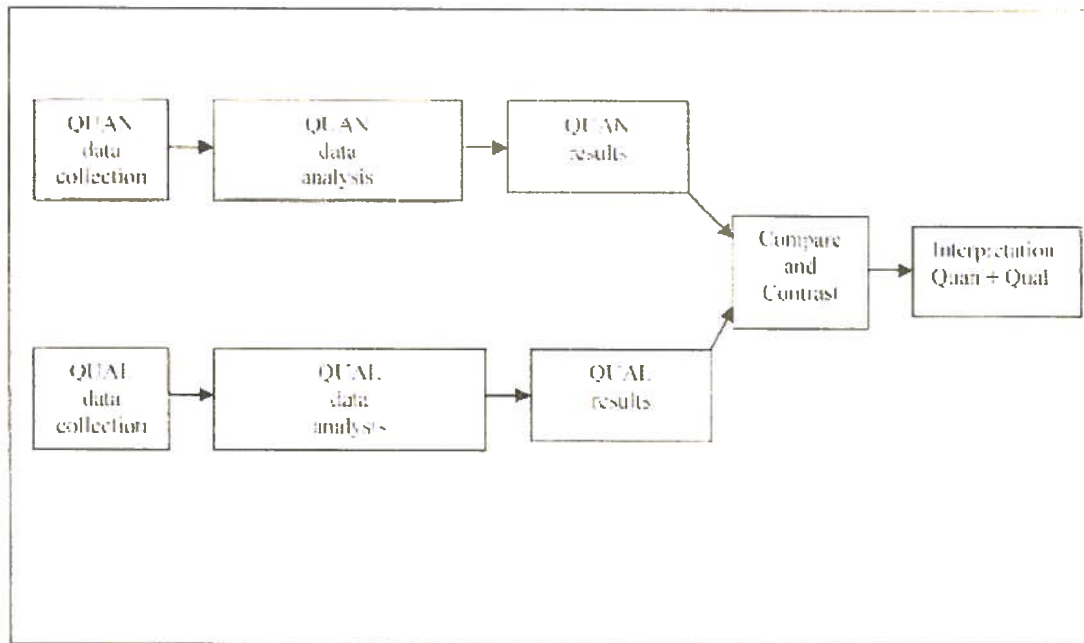


Figure 1. Mixed Triangulation Design: Convergence Model

In using this design, the researcher was able to acquire demographic information, reason for foster care entry, length of stay data, and permanency outcome results in the context of the research and using a comparative method look for emerging themes within the responses. Next, these themes are compared to statistical findings of Groups 1 and 2. The outcome of this data is a presentation of descriptive data based on the survey questions. With descriptive data in hand, the researcher has the opportunity to perform statistical testing which yields the strength of the relationship among the variables.

The qualitative aspect of this design methodology allowed for the use of open ended questions on the questionnaire. This is crucial to the study because it provides the study with additional qualitative depth and a deeper understanding of factors affecting permanency outcomes. These perceptions would not be evident within the quantitative data as case manager's perceptions are not captured within this dataset.

Use of Surveys and Questionnaires

Quantitative research is a mode of inquiry for deductive research, when the aim is to test hypothesis, gather descriptive information, or examine relationships among variables. Data obtained quantitatively provides measureable evidence and the ability to make generalizations of a population (Creswell, Klassen, Clark, & Smith, 2011). The use of a self-designed close ended questionnaire within the study of factors affecting permanency outcomes for foster care children in Georgia collects demographic information and foster care data from the review of foster care files. Upon statistical testing, the strength of the relationship amongst the variables is noted and compared with the qualitative results.

Within qualitative research, surveys usually measure the perception and attitudes of a group (Creswell, 2005). For the purposes of this study, the perceptions of foster care case managers were obtained through the use of a self-designed open ended survey. Demographic data were gathered to provide an overall picture of the participant's within the study. Considered descriptive research, qualitative data attempts to describe phenomena (Cook & Cook, 2008). This study collected data regarding the perceptions of foster care case managers through a survey regarding permanency outcomes. These data

will provide insight into additional factors affecting permanency outcomes for foster care children in Georgia.

Statistical methods are not used to analyze qualitative data. Instead, the researcher looks for themes within the data. A constant comparative method (CCM) was used to analyze the qualitative data within this study. Developed by Strauss and Glaser, CCM involves the constant comparison of data obtained. This method is derived from Grounded Theory (Green, 1998). When applying this method of analysis, the researcher seeks to explore the perceptions of the participants with respect to particular phenomena (Alberti-Alhtaybat & Al-Htaybat, 2010). Within this study, the case manager's perceptions were compared with the statistical outcome of the quantitative data.

Description of the Site

The samples of files reviewed for this study were a part of the 2003-2010 foster care census of Neighbor To Family (NTF). Neighbor To Family is a national private foster care agency specializing in keeping siblings together. All of the siblings housed in NTF foster homes are placed by referral through the Georgia Department of Family and Children Services. Accepting referrals 24 hours a day, 7 days a week, the DFCS placement unit will contact a specific NTF county and provide information on the sibling group they want to place. NTF will then determine if there is a home that can meet the needs of the siblings and a placement determination is made. The census fluctuates weekly, and beginning in 2010, the census has steadily declined due to DFCS keeping children in the home as opposed to placing them in care. Within 2011, the average weekly census was approximately 230 children.

In Georgia, NTF has been in operation since 2002. Upon inception, NTF employed a tripod model of services with the goal of providing support to the foster family and birth family therefore increasing the chances of successful permanency. This tripod model consisted of a Foster Care Case Manager (FCCM), Licensed Therapist, and Family Advocate (FA). Over time and with a change in service delivery implemented within the state of Georgia, the therapist position disappeared. Instead, mental health services are outsourced. The Case Managers are responsible for managing all aspects of the case. Case Managers directly supervise the foster caregivers. They ensure the foster caregivers on their caseload achieve and maintain a minimum of 50 mandatory training hours, attend school meetings, and are meeting the mental, physical, and emotional needs of foster children placed in their homes.

During the school year case managers attend school meetings, meet with children in the school and maintain contact with school Social Workers. Maintaining frequent contact with schools enables case managers to track the child's success and possible adjustment difficulties. Case Managers attend all court hearings and present updates on the cases in question. In addition to managing the educational needs of children, Case Managers also ensure all medical and mental health needs are met. Upon entering care, each child undergoes psychological testing which yield recommendations. In turn, these recommendations are added to the child's individual case plan.

One of the most difficult assignments in child welfare is working with parents whose children have been removed and placed into care (Gerring, Kemp, & Marcenko, 2008). A unique position within NTF, the Family Advocates is solely committed to working with the birth parent(s) and assisting them with the completion of their DFCS

case plan. If the permanency goal is reunification, the biological parent or caregiver must complete numerous goals that may include: locating appropriate housing, employment, completing substance abuse or parenting programs, and completing or maintaining mental health services if necessary.

The FA is in charge of arranging and facilitating visitations between the children and their parents. Visitation is a common requirement in reunification case plans. Scholars have indicated that it is beneficial when children maintain contact with their biological parents while in care. This contact is helpful for their continued physical and emotional growth, overall adjustment while in care, and possibly decreases their length of time in care (McWey, et al., 2004). The combined efforts of NTF Case Managers and Family Advocates in addition to caring and supportive foster caregivers have increased permanency outcomes of foster care children in care. The length of stay for children within Georgia NTF ranges between 7-8 months in comparison to the state's length of stay of an estimated 25 months in 2010 (Administration for Children and Families, 2010).

Sample and Population

This mixed methods study consisted of both qualitative and quantitative data samples. Qualitative data in the form of surveys were administered to 5 Fulton Case Managers and 5 DeKalb Case Managers, resulting in a qualitative sample size of 10. The quantitative sample consisted of children ages 0-18 years of age that were in foster care within the 2003-2010 date range. The majority of foster care children within this study were between the ages of 0-5. They were African American and were in care a matter of

months (see Table 3.) After running descriptive statistics to analyze permanency outcomes, the majority of the sample (Groups 1 and 2) had a permanency goal of reunification (see Table 3).

Table 3

Age of Child, Length of Stay and Permanency Outcomes (N=241)

Variable	Group 1		Group 2	
	Frequency	Percent	Frequency	Percent
Age of child				
0-5	99	41.1%	109	45.2%
6-11	87	36.1%	81	33.6%
12-17	54	22.4%	46	19.1%
18 & up	1	0.4%	5	2.1%
Length of Stay				
Matter of days	6	27.8%	57	23.7%
Matter of months	89	36.9%	110	45.6%
At least 1 year	38	15.8%	37	15.4%
2-5 years	44	18.3%	36	14.9%
6-10 years	3	1.2%	1	0.4%

Table 3 (continued)

Variable	Group 1		Group 2	
	Frequency	Percent	Frequency	Percent
Permanency Outcomes				
Reunification	138	57.3%	127	52.7%
Adoption	17	7.1%	19	7.9%
Long Term Foster Care	0	0.0%	2	0.8%
Guardianship	11	4.6%	5	2.1%
Live with grandparents	70	29.0%	67	27.8%
Still in care	1	0.4%	13	5.4%
Aged out of care	4	1.7%	8	3.3%
Total	241	100.0%	241	100.0%

The sample was divided into two groups according to the year. The samples were obtained from Fulton and DeKalb Counties. The Kenny A. Consent Decree names Fulton and DeKalb Counties in the lawsuit. This was the rationale behind selecting these two counties within NTF only. The review began with identifying all children who were in care in Fulton and DeKalb NTF within the specified time frame. The Policy Group 1 focused on a file review from children in care during the years 2003 through 2006. The Kenny A Group 2 consisted of a file review of children in care during the years 2007 through 2010. This resulted in a total initial sample size of 1,504 files.

After reviewing the files, it was noted that demographic information was missing from some of the files which resulted in the exclusion of files. A total of 138 files were eliminated from the DeKalb sample. Files were excluded due to missing demographic or permanency data. After exclusion, DeKalb had 725 files left within the sample. For Fulton a total of 133 files were removed from the total sample for the same reasons. After these exclusions the total Fulton sample was 508. After combining Groups 1 and 2, the total sample size was 1233 ($N=1233$).

Employing probability or random sampling methods means that every element in the population has the same known probability of being selected for inclusion in the sample (Yegidis & Weinback, 1991). Due to the large sample size, systematic random sampling within each group was used to determine the final sample size. According to Yegidis and Weinback (1991), systematic random sampling selects elements from a sampling frame through the use of a sampling integer. For the purpose of this study, the researcher estimated that 400 files would be a representative sample of children within the foster homes of NTF. To achieve a sample of 400, the sampling interval was calculated as such, sampling interval (k) = $1233/400=3$. After completing this process, every third case was identified within each group producing a total sample size of 414 cases ($N=414$). Upon entry into the Statistical Package for the Social Sciences (SPSS), the total number of valid cases resulted in 241 ($N=241$).

Noted by Castillo (2009) in addition to its simplicity, systematic random sampling allows the researcher to add a certain process into the random selection of subjects. By using this process there is assurance in equally dividing the population. On the other hand as a disadvantage, this system of selection could possibly interact with a

hidden trait within the population. For example, every third child selected within this study may have been African American. If this were the case within this study a significant number of African American children would have been omitted.

Instrumentation

This study utilized two self-designed instruments, one collected qualitative responses and the other gathered quantitative data. Data were obtained for Policy Group 1 through the use of a Length of Stay Questionnaire. The questionnaire consisted of six questions (6). Section I contained three questions which collected demographic information about the characteristics of the children in care. Section II was labeled Foster Care Status. This section highlighted reasons for placement into care, length of time in care, and permanency outcomes. The questionnaire remained the same for Kenny A Group 1.

The qualitative instrument was an open ended survey titled: Private Georgia Foster Care Case Manager Survey. Section I presented the case manager with ten (10) open ended questions. Questions 1-2 assessed the case managers understanding of permanency. Questions 3-4 focused on policies within the study and the questions were written to ascertain the case manager's knowledge of foster care policies. Question 5 asked each case manager to estimate the average length of stay in care for the children on their caseload. In addition to federal policy questions, the survey centered on the impact the Kenny A Consent Decree has on permanency outcomes if any. Questions 6-8 were open ended questions in which case managers had the opportunity to document their understanding of Kenny A and state their beliefs as to the factors that influence

permanency outcomes. Finally, the last question, #9 requested the opinion of case managers as to factors influencing permanency outcomes for foster care children within Neighbor To Family. Section II of this survey collected demographical information for the case manager participants.

Treatment of Data

In order to make use of data in the correct form, statistical treatment of data is necessary (Kalla, 2009). Descriptive statistics is used to treat the data in the study of the impact of foster care policies affecting permanency outcomes for foster care children in private foster care in Georgia. The use of descriptive statistics serves several purposes within this study. In addition to helping the researcher understand the data, descriptive statistics helps the researcher understand how the data is distributed across a range of values (McHugh, 2003). Descriptive statistics include summary tables, graphs, frequencies, percentages, measures of central tendency, and measures of variability (Abu-Bader, 2006). Quantitative data was collected and analyzed using the Statistical Package for the Social Sciences (SPSS 13.0 for Windows).

Chi-square was the statistical method of testing the variables within this study. This test was selected to examine the statistical association between foster care policies, the independent variable and permanency outcomes, the dependent variable within the study. The level of significance depends on the difference between the observed and expected frequencies. The greater the chi-square value, the smaller the level of significance (Abu-Baer, 2006).

This nonparametric test does not require data to be continuous, but the sample must be representative of the population. The sample within this study was compiled using probability sampling methods, more specifically the sample size was chosen by systemic random sampling. A sample is considered representative of the population if it is drawn through probability sampling methods (Abu-Bader, 2006). Other assumptions when using chi-square require that the dependent and independent variables are measured at the nominal level. This means that the variables are exclusive and exhaustive.

Crosstabulation presents the observed frequencies of the dependent variable as a function of the independent variable. Crosstab calculations were conducted between: Group 1 Question 6 and Group 2 Question 12, permanency outcomes. The results are displayed in Table 5, Permanency Outcomes. The second crosstabulation was completed within Group 1 Question 5 and Group 2 Question 11. The findings are presented in Table 6, Length of time in care Crosstabulation. To determine the statistical significance at the .05 level, the statistical test, chi-squared (X^2) was used to obtain the results of interest from the data.

In addition to quantitative data analysis, this mixed methods study incorporated an analysis of qualitative data. A constant comparative method (CCM) was used to analyze the qualitative data within this study. In the Triangulation Convergence Model, analyzing qualitative data is completed in two steps. Step one included collecting data from the qualitative questionnaire and quantitative survey. Next the researcher compiled themes from qualitative data then compared the findings with the quantitative data.

Limitations of the Study

There were several unavoidable limitations within this study. Beginning with the literature review, there was minimal literature with respect to the effectiveness of federal foster care policies after implementation into various child welfare systems nationwide. Numerous sources cited the etiology of foster care policies, but current data regarding how these policies were implemented at the state and local levels and their effect, if any they had on permanency outcomes for children in foster care was absent.

The next limitation centers on the sample size and data collection methods. After completing the file review, the researcher had to omit approximately 271 cases from the study due to missing demographic data or permanency outcome information. The inclusion of the additional cases would have made the sample greater and increased the researcher's ability to make generalizations. The sample size for the quantitative portion of the study consisted of a file review of 241 valid foster care files. However, the sample size for the qualitative data incorporating the perspectives of foster care case managers was considerably smaller (N=10), creating another limitation within the study.

With respect to qualitative data provided by foster care case managers, their perspectives were acquired through the use of a researcher developed Private Georgia Foster Care Case Manager Survey. This survey collected demographic data and case managers were asked to answer nine open-ended questions. These questions were in reference to permanency outcomes and federal policies. The survey issued lacked probing in-depth questions that could have established a greater relationship between the variables. The researcher could have gained a greater understanding of the case manager's beliefs and opinions surrounding permanency outcomes if face-to-face

interviews were conducted. This study concentrated on Georgia's child welfare system. Georgia does not have a specific website which keeps a record of their foster care database that is available to the public. The majority of documentation obtained pertaining to Georgia's child welfare system was collected through an actual foster care file review of children in care with Neighbor To Family. National foster care data was obtained through federal foster care reports found on the U.S. Department of Health and Human Services website.

The initial sample size for this study was great, $N=1233$. After systemic random sampling, the sample size was $N=241$. Still an effective number for quantitative data, the sample size for the qualitative aspect of this study was small, $N=10$. Another limitation was the setting of the study. The study included only one private foster care agency within Georgia. To gain a better understanding of factors affecting permanency outcomes in Georgia, focusing on more than one private agency would have increased the study's ability to make generalizations. Going a step further, comparing the permanency outcomes of Neighbor To Family with permanency outcomes of Fulton and DeKalb DFCS, could have produced significant findings.

Other limitations are noted as issues of validity and reliability. Joppe (2000) describes reliability within quantitative studies as the extent to which results of a study are consistent over time, are an accurate representation of the total population, and the study can be reproduced. Within the same context, validity refers to whether the research measures what it was intended to measure (Joppe, 2000). Validity and reliability are looked at differently in mixed methods studies. Scholars have debated the acknowledgement of reliability within mixed methods studies. Reliability within

quantitative studies is a concept to evaluate quality with the purpose of explaining phenomena. The concept of reliability within qualitative studies serves the purpose of creating an understanding of the phenomena (Golafshani, 2003). Reliability within qualitative studies can be misleading. Instead, scholars Lincoln and Guba (1985) use the term dependability to identify reliability within qualitative studies.

Threats to validity within this study are noted within the data collection methods. The sample sizes of qualitative and quantitative data are significantly unequal. The instruments used to collect qualitative and quantitative data were self-developed therefore lacking construct validity. Construct validity refers to whether an instrument has high correlations with existing instruments that measure the same construct (Abu-Bader, 2006). Within the extensive literature review, instruments focusing on permanency were not found.

Summary

Chapter III contained a description of the research methodology within this study and introduced the sample size (N=241) and population. This chapter presented the Triangulation Design: Convergence Model, as the mixed methods research design of this study. Rationale of this design and its appropriateness in studying policies and permanency outcomes were also mentioned. This chapter reviewed both qualitative and quantitative instruments for data collection and identified the components of the survey and questionnaire.

Within the methodology chapter, the researcher described the site from which the qualitative and quantitative samples were obtained. Methods used to collect the

quantitative sample were explained through the use of systemic probability sampling. At the conclusion of Chapter III, the treatment of data was broken down into identifying descriptive statistics and the statistical test used to test the independent and dependent variables. Finally, the chapter concluded with a presentation of the limitations found within this mixed methods study.

Chapter IV will consist of a presentation of findings for this study. The demographic data for the qualitative and quantitative samples will be displayed and the research questions will be introduced one final time and statistical findings along with qualitative findings will be exposed in an attempt to answer the questions. Finally, the chapter will end with the researcher accepting or rejecting the hypothesis.

CHAPTER IV

PRESENTATION OF FINDINGS

This is a study exploring the impact foster care policies have on permanency outcomes for children in Georgia's private foster care. This chapter presents the demographic data of the sample and displays the results of the statistical analysis utilized in testing the null hypotheses and ultimately answering the proposed research questions. The research questions are noted as:

R_{Q1}: Is there a statistically significant relationship between the permanency rates of Group 1 and Group 2?

R_{Q2}: Is there a statistically significant relationship between the length of stay rates of Group 1 and Group 2?

This is a mixed methods study that incorporates a Triangulation design: Convergence Model. This design was chosen because it allows the researcher to compare and contrast quantitative results with qualitative findings. In this study, the comparison ability allows the researcher to collect qualitative data which enhances the study and provides depth. The qualitative analysis and emerging themes are also found within this section.

Demographic Data

The demographic characteristics of the study sample are reflected below in Table 4. Descriptive statistics were used to analyze the following variables: age, gender, race, and reason for foster care placement. This quantitative portion of the study contained a file review of 241 children in care within the 2003 to 2010 time frame, (N=241).

Table 4

Demographic profile of study participants (N=241)

Variable	Group 1		Group 2	
	Frequency	Percent	Frequency	Percent
Age of child				
0-5	99	41.1%	109	45.2%
6-11	87	36.1%	81	33.6%
12-17	54	22.4%	44	19.1%
18 & up	1	0.4%	5	2.1%
Gender of child				
Male	125	51.9%	117	48.5%
Female	116	48.1%	124	51.5%

Table 4 (continued)

Variable	Group 1		Group 2	
	Frequency	Percent	Frequency	Percent
Race of child				
African American	227	94.2%	215	89.2%
Asian	1	0.4%	0	0.0%
Caucasian	3	1.2%	5	2.1%
Other	10	4.1%	21	8.7%
Reason for Placement				
Neglect	198	82.2%	232	96.3%
Physical abuse	21	8.7%	8	3.3%
Sexual abuse	5	2.1%	1	0.4%
Voluntary Placement	3	1.2%	0	0.0%
Abandonment	14	5.8%	0	0.0%
Total	241	100.0%	241	100.0%

After summarizing Table 4, in both Groups 1 and 2, the majority of children in care were from the ages of 0-5. Within Group 1, 41% or N=99 were within the 0-5 age range. Of the foster children in Group 2, 45% or N=109, fell within the 0-5 age range. There were more males in care from 2003 to 2006 in Group 1 and more females in care

in Group 2 from 2007-2010. In both groups, the foster care population was overwhelmingly represented by African American children. Within Group 1, 94% of the sample, N=227 were African Americans compared to 89% or N=215 in Group 2, this specific data calls attention to another issue within the child welfare system.

An additional troubling statistic emerges within the demographic data relating to race. Within Group 1, 84% were identified as African Americans compared to 89% in Group 2. Overrepresentation of African Americans within child welfare has been an issue for some time (Shaw, Putnam, Magruder & Needell, 2008). According to the 2010 U.S. Census data, over half of the populations in DeKalb County are African Americans (54%), Fulton County data reports African Americans comprising 44% of the total county population.

Children enter care due to substantiated cases of abuse and neglect. Neglect is the most common form of maltreatment which oftentimes goes untreated due to varying definitions of neglect (DePanfilis, 2006). Because of varying definitions from state to state, experts within the child welfare field have created categories of neglect. These categories provide a framework for case workers which helps identify instances of neglect. Types of neglect are listed as: physical and medical neglect, lack of supervision, environmental, emotional, and educational neglect (DePanfilis, 2006). In this study, 82% of the children in care in Group 1 and 96% of children in care in group 2 entered care due to reports of neglect.

Research Questions and Hypotheses

Descriptive statistics were used to analyze the demographic data of the study sample. To explore the impact of the two independent variables on the dependent

variable, inferential statistics were implemented. Inferential statistics consists of parametric and nonparametric techniques that researchers use to make generalizations about a sample population (Abu-Bader, 2006). The bivariate test, chi-square (X^2), a nonparametric method of testing the null hypotheses within this study, was selected based on the appropriateness for the level of measurement. The results are presented in Crosstabulation Tables 6 and 8. The dependent variable was measured at the nominal level. As Abu-Bader (2006) writes, nonparametric tests are appropriate when the dependent variable is measured at the ordinal or nominal levels of measurement. Nominal levels of measurement hold that variables contain attributes that are exhaustive and mutually exclusive (Abu-Bader, 2006). This section provides an analysis of the research questions and testing of the null hypotheses.

R_{Q1} : Is there a statistically significant relationship between the permanency rates of Group 1 and Group 2?

H_{o1} : There is no statistically significant relationship between the permanency rates of Group 1 and Group 2.

The chi-square (X^2) test of association was administered and the crosstabulation results are displayed in Table 5 followed by the chi-square test results in Table 6.

Table 5. Permanency Outcomes Crosstabulation

		Grp 1 Q6		
		<u>Permanency Outcomes</u>		
		Aged out of care		Total
Grp 2 Q12	Reunification	Count	3	127
	Permanency Outcomes	% of Total	1.2%	52.7%
	Adoption	Count	0	19
		% of Total	.0%	7.9%
	Long Term Foster Care	Count	0	2
		% of Total	.0%	.8%
	Guardianship	Count	0	5
		% of Total	.0%	2.1%
	Live with Grandparents	Count	1	67
		% of Total	.4%	27.8%
	Still in care	Count	0	13
		% of Total	.0%	5.4%

Table 5 (continued)

		Grp 1 Q6		
		<u>Permanency Outcomes</u>		
		Aged out of care		Total
Grp 2 Q12	Aged out of care	Count	0	8
Permanency Outcomes		% of Total	.0%	3.3%
		Count	4	241
		% of Total	1.7%	100.0%

Table 6. Results of Chi-Square Test

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	28.081 ^a	30	.566
Likelihood Ratio	27.302	30	.607
Linear-by-Linear Association	.132	1	.717
N of Valid Cases	241		

The chi-square test of association was used to examine the association between permanency outcomes in Groups 1 and 2. The results do not yield a significant relationship between the two variables ($X^2_{(df=1)} = 28.081$; $p < .05$). In other words, the findings indicate that there is no relationship between permanency outcomes and foster care policies in Group 1 and no relationship between permanency outcomes and the Kenny A. Consent Decree in Group 2. Due to these results, the null hypothesis is accepted.

The second research question and null hypothesis of this study are:

R_{Q2}: Is there a statistically significant relationship between the length of stay rates of Group 1 and Group 2?

H_{O2}: There is no statistically significant relationship between the length of stay rates of Group 1 and Group 2.

The chi-square (X^2) test of association was administered and the crosstabulation results are displayed in Table 7 followed by the chi-square test results in Table 8.

Table 7. Length of time in care Crosstabulation

			<u>Grp 1 Q5 Length of time in care</u>					Total
			Matter of days	Matter of months	At least 1 year	2-5 years	6-10 years	
Grp 2 Q11 Length of time in care	Matter of days	Count	16	19	9	11	2	57
		% of total	6.6%	7.9%	3.7%	4.6%	.8%	23.7%
	Matter of months	Count	26	47	20	16	1	110
		% of total	10.8%	19.5%	8.3%	6.6%	.4%	45.6%
	At least 1 year	Count	11	10	6	10	0	37
		% of total	4.6%	4.1%	2.5%	4.1%	.0%	15.4%
	2-5 years	Count	13	13	3	7	0	36
		% of total	5.4%	5.4%	1.2%	2.9%	.0%	14.9%
	6-10 years	Count	1	0	0	0	0	1
		% of total	.4%	.0%	.0%	.0%	.0%	.4%
	Total	Count	67	89	38	44	3	241
		% of total	27.8%	36.9%	15.8%	18.3%	1.2%	100.0%

Table 8. Results of Chi-Square Test

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	13.897 ^a	16	.606
Likelihood Ratio	14.119	16	.590
Linear-by-Linear Association	.967	1	.325
N of Valid Cases	241		

The chi-square test of association was used to examine the association between length of stay in Groups 1 and 2. The results do not yield a significant relationship between the two variables ($X^2_{(df=1)} = 13.897$; $p < .05$). The findings demonstrate a lack that of relationship between length of stay rates in Groups 1 and 2. Due to these results, the null hypothesis is again accepted. After accepting the null hypothesis, the researcher decided to implement chi-square and test for any significant associations amongst variables within Group 1 and Group 2. As a result of further statistical testing, a significant relationship was discovered between permanency outcomes in Group 1 and age of child in Group 1. The crosstabulation results are displayed below in Tables 9 and 10.

Table 9. Group 1 Permanency Outcomes and Group 1 Age of Child Crosstabulation

			<u>Grp 1 Q1 Age of child</u>				Total
			0-5	6-11	12-17	18 & up	
Grp 1 Q6	Reunification	Count	59	52	27	0	138
Permanency Outcomes		% of Total	24.5%	21.6%	11.2%	.0%	57.3%
	Adoption	Count	7	8	2	0	17
		% of Total	2.9%	3.3%	.8%	.0%	7.1%
	Guardianship	Count	2	3	6	0	11
		% of Total	.8%	1.2%	2.5%	.0%	4.6%
	Live with Grandparents	Count	31	24	15	0	70
		% of Total	12.9%	10.0%	6.2%	.0%	29%
	Still in care	Count	0	0	1	0	1
		% of Total	.0%	.0%	.4%	.0%	.4%
	Aged out of care	Count	0	0	3	1	4
		% of Total	.0%	.0%	1.2%	.4%	1.7%
	Total	Count	99	87	54	1	241
		% of Total	41.1%	36.1%	22.4%	.4%	100.0%

Table 10. Results of Chi-Square Test

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	79.827 ^a	15	.000
Likelihood Ratio	28.568	15	.018
Linear-by-Linear Association	3.266	1	.071
N of Valid Cases	241		

The chi-square test of association was used to examine the association between permanency and age of child, both variables within Group 1. The results yielded a significant (.000) relationship between the two variables ($X^2_{(df=1)} = 79.827$; $p < .05$). This finding could serve as grounds for further research on this topic.

Supplemental Qualitative Analysis

This study explores the impact foster care policies have on permanency outcomes for children in Georgia's private foster care. This research employs a mixed methods approach as a means of gaining deeper insight on the issues preventing or increasing permanency outcomes for foster care children in Georgia. The awareness provided through qualitative data would go unnoticed in a quantitative design. The chi-square statistical test yielded no relationship between the independent and dependent variables. Qualitative data was collected in the form of surveys that were administered to 10 private foster care case managers within Neighbor To Family.

In an effort to obtain a comprehensive picture surrounding permanency, the following questions were asked:

1. As foster care case managers, you are charged with helping foster children achieve permanency. What is your understanding of permanency?
2. Are you familiar with federal foster care policies enacted to increase permanency outcomes for foster children? If so, please explain.
3. Are you familiar with the Adoption Assistance and Child Welfare Act of 1980? If so, please explain briefly.
4. Are you familiar with the Adoption Assistance and Safe Families Act of 1997? If so, please explain briefly.
5. What is the average length of stay in foster care for the children on your case load?
6. What is your understanding of the Kenny A. Consent Decree?
7. Do you believe federal foster care policies effect permanency outcomes for foster care children in Georgia?
8. Do you believe that permanency for foster care children in Georgia is driven by the Kenny A. Consent Decree?
9. In your opinion, what factors influence permanency outcomes within your organization?

After collecting the data from the surveys, the researcher began an analysis which required separating the responses into emerging themes and perspectives. The responses produced themes identified in Table 11 below.

Table 11. Foster Care Survey Questionnaire and Corresponding Responses/Themes

Questions	Responses	Themes
Question 1	<p>Reunify children with family, adoption, or guardianship.</p> <p>Helping children find or re-gain stability.</p> <p>Safe and stable placement.</p> <p>A forever home.</p> <p>A home where an adult has legal responsibility of the child.</p>	<p>Stability</p> <p>Reunification options</p>
Question 2	<p>I've heard of policies, but I'm not sure what the laws state.</p> <p>Permanency policies are aimed at decreasing child abuse and neglect, reducing length of stay in care, increase placement stability.</p> <p>Expediting permanency hearings, ensuring families receive appropriate resources.</p> <p>I'm not familiar with foster care policy.</p>	<p>Unfamiliar with laws.</p> <p>Identification of aspects of permanency</p>
Question 3	<p>Adopted children receive benefits (financial).</p> <p>Not sure what this policy means.</p>	<p>Unfamiliar with AACWA</p> <p>Financial benefits</p>
Question 4	<p>Not sure what this policy means.</p> <p>States have to complete annual reports reflecting their performance on areas related to safety and permanency.</p>	<p>Unfamiliar with ASFA.</p> <p>Completion of annual reports.</p> <p>Safety, permanency</p>

Table 11 (continued)

Questions	Responses	Themes
Question 5	12 months Not sure 6-8 months 10 months 18 months	6-18 months
Question 6	Place children in a safe home near their family of origin, maintain safety and reunification as soon as possible. Georgia needs new policies and procedures to protect children. I don't know what Kenny A is. Derived from a lawsuit, state has to maintain certain standards of permanency, education and maltreatment for 3 consecutive... Resulted from a child dying in care	Lawsuit Unfamiliar with Kenny A. Child death GA must meet certain standards of the consent decree.
Question 7	Yes, because of funding. No, permanency is effected by services and court follow through To some degree, I'm not sure	Funding (lack of) influences permanency. Service delivery influences permanency
Question 8	No It's driven by the lack of funding	Permanency is driven by lack of funding. GA can't afford to keep kids in care.

Table 11 (continued)

Questions	Responses	Themes
Question 9	Funding Placement stability, community resources, family support Families completing their case plans	Funding Family support Case plans

Overall, when comparing the qualitative responses to the quantitative data, the qualitative piece provides another dimension that was absent from the statistical analyses. From the perspectives of foster care case managers, the majority of workers felt as if permanency outcomes are driven by other influences outside of federal policies. One participant noted “Georgia like the rest of the country is facing financial hardships. Maintaining children in care is expensive. The state is pushing for permanency because the system can no longer afford to pay for foster care.” Another perspective spoke to the delivery of services as affecting permanency more so than policies. From this viewpoint, the Ecological Perspective ties in with effective service delivery leading to increased permanency outcomes.

Interestingly enough, few case managers had knowledge of foster care policies, but described complying with state procedures in their delivery of services which coincides with federal policy. All 10 case managers had an understanding of the Kenny A. Consent Decree and the measures foster care agencies, both private and public in

Georgia as a whole are charged with meeting and maintaining compliance with. In fact, the need for compliance was a prevalent theme and some attributed this need to achieving permanency outcomes.

Summary

Chapter IV presented the findings of this study. Demographic data was presented which identified the majority of the sample (N=241) as African American children between the ages of 0-5. The majority of children had the permanency goal of reunification as a case plan goal and 52% of the sample in Group 2 was reunified within a matter of months compared to 36% in Group 1. The research questions were identified as:

R_{Q1}: Is there a statistically significant relationship between the permanency rates of Group 1 and Group 2?

R_{Q2}: Is there a statistically significant relationship between the length of stay rates of Group 1 and Group 2?

Descriptive statistics were used to analyze the demographic data of the study sample. To explore the impact of the two independent variables on the dependent variable, inferential statistics were implemented. Inferential statistics consists of parametric and nonparametric techniques that researchers use to make generalizations about a sample population (Abu-Bader, 2006). The bivariate test, chi-square (X^2), a nonparametric method of testing the null hypotheses within this study, was selected based on the appropriateness for the level of measurement.

Statistical testing produced no significant relationship between the independent and dependent variables. Therefore both null hypotheses were accepted. However, upon further statistical testing, a significant relationship was discovered between permanency outcomes and age of child within Group 1. This research employs a mixed methods approach as a means of gaining deeper insight on the issues preventing or increasing permanency outcomes for foster care children in Georgia. The awareness provided through qualitative data would go unnoticed in a quantitative design. Crosstab calculations were conducted, and the results were displayed in Tables 5 and 6. The emerging themes of the qualitative data fell in line with other phenomena contributing to the permanency outcomes of foster children in Georgia's private foster care. The next and final Chapter V presents the conclusions and recommendations of this study. Finally, in Chapter V, the researcher will identify implications for Social Work which developed from this study.

CHAPTER V

CONCLUSIONS AND RECOMMENDATIONS

This mixed methods study was designed to answer two research questions:

R_{Q1}: Is there a statistically significant relationship between the permanency rates of Group 1 and Group 2?

R_{Q2}: Is there a statistically significant relationship between the length of stay rates of Group 1 and Group 2?

This chapter presents the conclusion and recommendations of this study. This section is presented in two sections, the first section will summarize the study and the second section will present the implications of Social Work.

Summary

A 2009 Child Maltreatment Report indicated that child protective agencies nationwide received an average of 3.3 million referrals alleging maltreatment of approximately 6 million children. Sixty percent of these referrals received some form of child protective service. Services were in the form of family preservation or placing children in foster care (Children's Bureau, 2010). News of children entering and remaining in care for extensive periods of time surfaced in 1959 with the publication of foster care drift research. This awareness led Congress to pass landmark foster care legislations in 1980 and 1997.

Public Law 96-272, the Adoption Assistance and Child Welfare Act was enacted in 1980 as a legal means of promoting permanency and addressing the foster care drift anomaly. As an enhancement of AACWA, in 1997, Congress approved the Adoption and Safe Families Act (P.L. 105-89) into law with the intentions of decreasing the length of stay for children in care, increasing the adoption of thousands of children that were in care over 24 months including children labeled as special needs and achieving other permanency alternatives such as reunification and guardianship, and developing performance measures to increase accountability among states (Chipungu & Goodley, 2004). Accountability measures were in the form of computer databases which tracked children and families in within the child welfare system and the implementation of Child and Family Service Reviews (CSFRs) facilitated by the Children's Bureau. Policy implementation is essential when you look at the day to day operation of child welfare systems, but lagging in the literature was current research discussing the efficacy of policy implementation.

The purpose of this study was to explore the impact foster care policies have on permanency outcomes for children in private foster care in Georgia. A Mixed Methods Triangulation Design, incorporating both qualitative and quantitative data was used to explore this study. This study utilized two self-designed instruments, one qualitative and one quantitative. Data was obtained for Policy Group 1 through the use of the Length of Stay Questionnaire. The questionnaire consisted of six (6) questions. Section I contained three questions which collected demographic information about the characteristics of the children in care. Section II was labeled Foster Care Status. This section highlighted

reasons for placement into care, length of time in care, and permanency outcomes. The questionnaire remained the same for Kenny A Group 2.

The qualitative instrument was a survey containing open ended questions titled: Private Georgia Foster Care Case Manager Survey. Section I presents the foster care case manager with ten (10) open ended questions. Questions 1-2 assessed the case managers understanding of permanency. Questions 3-5 focused on the policies within the study and gained their knowledge of foster care policies. Question 6 asked each case manager to estimate the average length of stay for the children on their caseload. They hypotheses were identified as:

H_{01} : There will not be a statistically significant relationship between the permanency rates of Group 1 and Group 2.

H_{02} : There will not be a statistically significant relationship between the length of stay rates of Group 1 and Group 2.

To determine if a statistically significant relationship existed, the chi-square test of association was used to examine the association between permanency outcomes in Groups 1 and 2 in the first hypothesis. The results did not yield a significant relationship between the two variables ($X^2_{(df=1)} = 12.606$; $p < .05$). The findings indicate that there is no relationship between permanency outcomes and foster care policies in Group 1 and no relationship between permanency outcomes and the Kenny A. Consent Decree in Group 2. Because of the results, the null hypothesis is accepted. Findings from statistical testing of the second hypothesis resulted in similar fashion. The chi-square test of association was used to examine the association between length of stay in Groups 1 and 2. The results do not yield a significant relationship between the two variables ($X^2_{(df=1)} = 13.897$;

$p < .05$). The findings demonstrate a lack that of relationship between length of stay rates in Groups 1 and 2. Due to these results, the null hypothesis is again accepted.

When comparing the qualitative responses to the quantitative data, the qualitative piece provided another dimension that was absent from the statistical analyses. From the perspectives of foster care case managers, the majority of workers felt as if permanency outcomes are driven by other influences outside of federal policies. Another perspective spoke to the delivery of services as affecting permanency more so than policies. From this viewpoint, the Ecological Perspective ties in with effective service delivery leading to increased permanency outcomes.

Attachment Theory as defined by Bowlby and Ainsworth, and the Ecological Perspective illustrated by Bronfenbrenner are used as the conceptual framework of this study to explain the importance the parent-child bond as it pertains to permanency and to develop an understanding of maltreatment from various societal and environmental perspectives. Under the consent decree, Georgia is mandated by the court system to reform the child welfare system and comply with the Kenny A. standards. Through qualitative data, it is perceived by NTF case managers that this litigation is the phenomena behind permanency outcomes for foster care children within their Georgia program. One outcome within the decree encourages family visitation. Outcome 21 states: at least 85% of all children with the goal of reunification shall have appropriate visitation with their parents to progress towards reunification. According to Bowlby attachment relationships, mainly those developed within the first three years of life create expectations and influence responses within relationships. As more and more children enter care and remain for extended periods of time, the parent-child attachment bond is

jeopardized. Due to the importance of this bond, maintaining family visitation is crucial and can prove beneficial in facilitating permanency outcomes more efficiently.

With respect to service delivery, as case managers view maltreatment from an ecological perspective, they will understand and recognize the multiple factors that contribute to child abuse and neglect. Under this theory, case managers and other child care workers should consider not only the parent's and caregiver's role in maltreatment, but will also notice other variables contributing to abuse and neglect which leads to foster care placement. The ecological model is important because it observes the shared responsibility among individuals, families, and communities which enables a proactive approach to intervening in cases of maltreatment.

Implications

The purpose of this study was to explore the impact foster care policies have on permanency outcomes for children in Georgia's private foster care. This study highlighted the delivery of services from one private organization in Georgia, Neighbor To Family. The findings within this study have produced numerous implications for social work and future research. First, it should be noted that children in care often come from high risk environments and experience multiple problems including mental health and behavioral difficulties as a result of their upbringing. In order to address their issues, case managers have to be flexible and incorporate a multifaceted approach when intervening to create permanency for children. This ecological approach focuses on the child's specific needs as well as the needs of the family.

Virtually all children received individual therapy while in care, but larger systemic interventions may be necessary to address the range of social, emotional, and cognitive difficulties faced by the child and the family. As social workers develop this awareness, they will understand that not only is it important to provide support and communication on a consistent basis, but changes in the environment which were the catalyst for maltreatment has to occur.

Child welfare services have historically protected children from abuse and neglect and provided temporary alternative placements for youth who are victims of maltreatment. Child protection laws were developed and implemented overtime by federal legislation, but little is known about the effectiveness of federal foster care policies. This mixed methods study highlighted the additional depth qualitative data adds to research. As social workers interact with children and families, knowledge is gained in the form of service delivery and greater awareness of ecological issues families face. When it comes to policies and policy implementation, it is often the front line workers, the case managers that are charged with putting new policies into effect. Gaining these perspectives through focus groups, interviews, and surveys could possibly foster more effective policy implementation.

As well, an unexpected finding of this study brought attention to the overrepresentation of African American children in foster care. From a sample size of 241 over half of the population was African American children between the ages of 0-5. Future research is necessary in understanding the operating procedures of child welfare systems and awareness of factors state workers take into account when deciding to remove children from their homes.

Finally, some form of permanency should be the goal for all children in care. The child welfare system focuses on the safety and well-being of children and now the paradigm is shifting to one where the importance of life long relationships is valued. As social workers engage children in care and work towards achieving permanency, it is important to keep in mind that all children need stable relationships outside of child welfare. Understanding aspects of attachment and ecological perspectives, principles which have guided the formation of federal policies should remain a priority.

APPENDICES

APPENDIX A

SURVEY QUESTIONNAIRES

Policy Group I: Length of Stay Questionnaire

This questionnaire is being administered to determine the length of stay and permanency outcomes for children in private foster care from 2003-2006.

Child #: _____

Date entered foster care: _____

Section I: Demographic Information

Place a mark (x) next to the appropriate item. Choose only one answer for each statement.

1. Age of Child

- _____ 1. 0-5
- _____ 2. 6-11
- _____ 3. 12-17
- _____ 4. 18>

2. Gender

- _____ 1. Male
- _____ 2. Female

3. Race

- _____ 1. African American
- _____ 2. Asian
- _____ 3. Caucasian
- _____ 4. Native American
- _____ 5. Hispanic
- _____ 6. Other (specify)

Section II: Foster Care Status

Place a mark (x) next to the appropriate item.

4. Reason for Foster Care Placement

- _____ 1. Neglect
- _____ 2. Physical Abuse
- _____ 3. Sexual Abuse
- _____ 4. Voluntary Placement
- _____ 5. Abandonment
- _____ 6. Other (specify)

APPENDIX A (continued)

5. Policy Group I Length of Time in Care: 2003, 2004, 2005, 2006

- ☐ 1. Matter of Days
- ☐ 2. Matter of Months
- ☐ 3. At least 1 year
- ☐ 4. 2-5 yrs
- ☐ 5. 6-10 yrs
- ☐ 6. Over 10 yrs

6. Permanency Outcome

- ☐ 1. Reunification (bio/caretakers)
- ☐ 2. Adoption
- ☐ 3. Long Term Foster Care
- ☐ 4. Guardianship
- ☐ 5. Live with relatives
- ☐ 6. Still in care
- ☐ 7. Aged out of care

APPENDIX A (continued)

Kenny A Group II: Length of Stay Questionnaire

This questionnaire is being administered to determine the length of stay and permanency outcomes for children in private foster care from 2007-20010.

Child #: _____

Date entered foster care: _____

Section I: Demographic Information

Place a mark (x) next to the appropriate item. Choose only one answer for each statement.

1. Age of Child

- _____ 1. 0-5
- _____ 2. 6-11
- _____ 3. 12-17
- _____ 4. 18>

2. Gender

- _____ 1. Male
- _____ 2. Female

3. Race

- _____ 1. African American
- _____ 2. Asian
- _____ 3. Caucasian
- _____ 4. Native American
- _____ 5. Hispanic
- _____ 6. Other (specify)

Section II: Foster Care Status

Place a mark (x) next to the appropriate item.

4. Reason for Foster Care Placement

- _____ 1. Neglect
- _____ 2. Physical Abuse
- _____ 3. Sexual Abuse
- _____ 4. Voluntary Placement
- _____ 5. Abandonment
- _____ 6. Other (specify)

5. Kenny A Group II Length of Time in Care: 2007, 2008, 2009, 2010

- _____ 1. Matter of Days
- _____ 2. Matter of Months
- _____ 3. At least 1 year
- _____ 4. 2-5 yrs
- _____ 5. 6-10 yrs
- _____ 6. Over 10 yrs

APPENDIX A (continued)

6. Permanency Outcome

- ☐ 1. Reunification (bio/caretakers)
- ☐ 2. Adoption
- ☐ 3. Long Term Foster Care
- ☐ 4. Guardianship
- ☐ 5. Live with relatives
- ☐ 6. Still in care
- ☐ 7. Aged out of care

APPENDIX A (continued)

Private Foster Care Case Manager Survey

This questionnaire is administered to determine private foster care case manager's perceptions of factors influencing permanency outcomes for children in Georgia's private foster care.

Section I.

This section contains a series of open ended questions aimed at assessing case manager's perceptions of factors affecting permanency outcomes for foster care children in Georgia.

1. As foster care case managers, you are charged with helping foster children achieve permanency. What is your understanding of permanency?

2. Are you familiar with federal foster care policies enacted to increase permanency outcomes for foster children? If so, please explain.

3. Are you familiar with the Adoption Assistance and Child Welfare Act of 1980? If so, please explain briefly.

4. Are you familiar with the Adoption and Safe Families Act of 1997? If so, please explain briefly.

5. What is the average length of stay in foster care for the children on your case load?

APPENDIX A (continued)

6. What is your understanding of the Kenny A Consent Decree?
7. Do you believe federal foster care policies effect permanency outcomes for foster care children in GA?
8. Do you believe permanency for foster care children in GA is driven by the Kenny A Consent Decree?
9. In your opinion, what factors influence permanency outcomes for your organization?

Section II. Demographic Information

Place a mark [x] next to the appropriate response.

1. Age

- ☐ 1. 21-29
☐ 2. 30-39
☐ 3. 40-49
☐ 4. 50+

2. Gender

- ☐ 1. Male
☐ 2. Female

3. Race

- ☐ 1. African American
☐ 2. Asian
☐ 3. Caucasian
☐ 4. Native American
☐ 5. Hispanic
☐ 6. Other (specify)

4. Marital Status

- ☐ 1. Married
☐ 2. Never Married
☐ 3. Divorced
☐ 4. Widowed
☐ 5. Other

APPENDIX A (continued)

5. Employment Status

- ☐ 1. Full-time
- ☐ 2. Part-time
- ☐ 3. Contractor
- ☐ 4. Other (specify)

6. What is your highest level of education completed?

- ☐ 1. College graduate
- ☐ 2. Some graduate training
- ☐ 3. Masters Degree
- ☐ 4. Doctorate
- ☐ 5. Other (specify)

7. Which of the following best describes your child foster care case management experience?

- ☐ 1. Less than 1 year
- ☐ 2. 1-4years
- ☐ 3. 5-9years
- ☐ 4. 10-14years
- ☐ 5. 15years or more

8. In which county are you a foster care case manager?

- ☐ 1. Fulton
- ☐ 2. DeKalb

APPENDIX B

CONSENT FORMS

Neighbor To Family Consent Form

A STUDY OF THE IMPACT FOSTER CARE POLICIES HAVE ON PERMANENCY OUTCOMES FOR CHILDREN IN GEORGIA'S PRIVATE FOSTER CARE

To: Tony Everett, Vice President of Neighbor To Family

From: Jamila T. Hankins, Clark Atlanta University Ph.D. Candidate

Re: Length of Stay Questionnaire

Mr. Everett:

I am conducting a research study on the impact foster care policies have on permanency outcomes for children in Georgia's private foster care. I am investigating permanency to examine the overall effectiveness of foster care policies which were enacted in part to improve permanency options for children in foster care. If you decide to participate, as the researcher I will obtain demographic and placement data on all children placed within your agency from 2003 through 2010. This data will then be divided into two groups. Group 1 will contain data ranging from 2003 through 2006 and Group 2 will contain data ranging from 2007 through 2010. The total sample size is estimated around 400 children. Data will be collected from the use of a self-designed Length of Stay Questionnaire and will remain confidential. All completed questionnaires will be stored in a locked file within the social work department on the campus of Clark Atlanta University.

If you decide to participate, upon completion of this study, you will have statistical data concerning permanency outcomes and length of stay for the youth in Neighbor To Family's foster home. This data could possibly serve as a means of promoting private vs. state foster care services. Taking part in this project is entirely up to you, and no one will hold it against you or your agency if you decide not to participate. If you take part, you may stop at any time without penalty. In addition, you may ask to have your data withdrawn from the study after the research has been conducted. The names and other identifying information of the children in your program will not be apart of this study due to confidentiality. Each child will be assigned a number. Data collected will consist of: date child entered care, age range, race, gender, reason child entered care, length of stay range, and permanency outcome.

APPENDIX B (continued)

If you want to know more about this research project, please contact me at: (770) 837-1215, . If you need to contact my advisor, Dr. Richard Lyle, he may be reached at: Whitney M. Young Jr., School of Social Work, Clark Atlanta University 223 James P. Brawley Dr. SW Atlanta, GA 30314, (404) 880-8006.

Sincerely,

Jamila Hankins

Consent Statement(s)

I agree to take part in this project. I know what I have to do as part of this study and that my participation can end at any time.

Signature

Date

APPENDIX B (continued)

Neighbor To Family Consent Form
A STUDY OF THE IMPACT FOSTER CARE POLICIES HAVE ON PERMANENCY
OUTCOMES FOR CHILDREN IN GEORGIA'S PRIVATE FOSTER CARE

To: Neighbor To Family Foster Care Case Managers

From: Jamila T. Hankins, Clark Atlanta University Ph.D. Candidate

Re: Private Foster Care Case Manager Survey

To Whom It May Concern:

I am conducting a research study on the impact foster care policies have on permanency outcomes for children in Georgia's private foster care. I am investigating permanency to examine the overall effectiveness of foster care policies which were enacted in part to improve permanency options for children in foster care. If you decide to participate, you will be asked to complete a self-designed Private Foster Care Case Manager Survey. This survey collects demographic information and seeks your responses with respect to foster care policies and length of stay questions. All responses will remain confidential. All completed questionnaires will be stored in a locked file within the social work department on the campus of Clark Atlanta University.

Taking part in this project is entirely up to you, and no one will hold it against you or your agency if you decide not to participate. If you take part, you may stop at any time without penalty. In addition, you may ask to have your data withdrawn from the study after the research has been conducted.

If you want to know more about this research project, please contact me at: (770) 837-1215, . If you need to contact my advisor, Dr. Richard Lyle, he may be reached at: Whitney M. Young Jr., School of Social Work, Clark Atlanta University 223 James P. Brawley Dr. SW Atlanta, GA 30314, (404) 880-8006.

Sincerely,

Jamila Hankins

APPENDIX B (continued)

Consent Statement(s)

I agree to take part in this project. I know what I have to do as part of this study and that my participation can end at any time.

Signature

Date

APPENDIX C

IRB APPROVAL LETTER

CLARK ATLANTA UNIVERSITY

Institutional Review Board

Office of Sponsored Programs

223 James P. Brawley Drive, S.W. * ATLANTA, GA 30314-4391 * (404) 880-8000

Formed in 1988 by consolidation of Atlanta University, 1865 and Clark College, 1869

December 16, 2010

Mr. Jamila T. Hankins <Jamila_Hankins@yahoo.com>
School of Social Work
Clark Atlanta University
Atlanta, GA 30314

RE: A study of Foster Care Policies Among Public and Private
Practitioners About the Length of Stay of Foster Care Children in
Georgia.

Principal Investigator(s): Jamila T. Hankins

Human Subjects Code Number: HR2010-12-373-1

Dear Mr. Hankins:

The Human Subjects Committee of the Institutional Review Board
(IRB) has reviewed your protocol and approved of it as exempt in
accordance with 45 CFR 46.101(b)(2).

Your Protocol Approval Code is HR2010-12-373-1/A

This permit will expire on December 15, 2011. Thereafter,
continued approval is contingent upon the annual submission of a
renewal form to this office.

The CAU IRB acknowledges your timely completion of the CITI IRB
Training in Protection of Human Subjects - "Social and Behavioral
Sciences Track". Your certification is valid for two years
(11/2012).

APPENDIX C (continued)

If you have any questions, please contact Dr. Georgianna Bolden at the Office of Sponsored Programs (404) 880-6979 or Dr. Paul I. Musey, (404) 880-6829.

Sincerely:

Paul I. Musey, Ph.D.

Chair

IRB: Human Subjects Committee

cc. Office of Sponsored Programs, "Dr. Georgianna Bolden"

APPENDIX D

SPSS PROGRAM ANALYSIS

TITLE 'LENGTH OF STAY AND PERMANENCY OUTCOMES FOR FOSTER CARE'.
SUBTITLE 'Jamila Hankins'.

DATA LIST FIXED/

ID 1-3
AGE1 4
GENDER1 5
RACE1 6
REASON1 7
LENGTH1 8
OUTCOM1 9
AGE2 10
GENDER2 11
RACE2 12
REASON2 13
LENGTH2 14
OUTCOM2 15.

VARIABLE LABELS

ID 'Case Number'
AGE1 'Grp1 Q1 Age of child'
GENDER1 'Grp1 Q2 Gender of child'
RACE1 'Grp1 Q3 Race of child'
REASON1 'Grp1 Q4 Reason for foster care placement'
LENGTH1 'Grp1 Q5 Length of time in care'
OUTCOM1 'Grp1 Q6 Permanency Outcomes'
AGE2 'Grp2 Q7 Age of child'
GENDER2 'Grp2 Q8 Gender of child'
RACE2 'Grp2 Q9 Race of child'
REASON2 'Grp2 Q10 Reason for foster care placement'
LENGTH2 'Grp2 Q11 Length of time in care'
OUTCOM2 'Grp2 Q12 Permanency Outcomes'.

VALUE LABELS

AGE1
1 '0-5'
2 '6-11'
3 '12-17'
4 '18 up/'
GENDER1
1 'Male'
2 'Female'.

APPENDIX D (continued)

RACE1

- 1 'African American'
- 2 'Asian'
- 3 'Caucasian'
- 4 'Native American'
- 5 'Hispanic'
- 6 'Other/'

REASON1

- 1 'Neglect'
- 2 'Physical Abuse'
- 3 'Sexual Abuse'
- 4 'Voluntary Placement'
- 5 'Abandonment'
- 6 'Other/'

LENGTH1

- 1 'Matter of days'
- 2 'Matter of months'
- 3 'At least 1 year'
- 4 '2-5 years'
- 5 '6-10 years'
- 6 'Over 10 years/'

OUTCOM1

- 1 'Reunification'
- 2 'Adoption'
- 3 'Long Term Foster Care'
- 4 'Guardianship'
- 5 'Live with Grandparents'
- 6 'Still in care'
- 7 'Aged out of care/'

AGE2

- 1 '0-5'
- 2 '6-11'
- 3 '12-17'
- 4 '18 up/'

GENDER2

- 1 'Male'
- 2 'Female/'

RACE2

- 1 'African American'
- 2 'Asian'
- 3 'Caucasian'
- 4 'Native American'
- 5 'Hispanic'
- 6 'Other/'

REASON2

- 1 'Neglect'
- 2 'Physical Abuse'
- 3 'Sexual Abuse'
- 4 'Voluntary Placement'
- 5 'Abandonment'
- 6 'Other/'

APPENDIX D (continued)

LENGTH2

- 1 'Matter of days'
- 2 'Matter of months'
- 3 'At least 1 year'
- 4 '2-5 years'
- 5 '6-10 years'
- 6 'Over 10 years'/'

OUTCOM2

- 1 'Reunification'
- 2 'Adoption'
- 3 'Long Term Foster Care'
- 4 'Guardianship'
- 5 'Live with Grandparents'
- 6 'Still in care'
- 7 'Aged out of care'/'.

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APPENDIX D (continued)

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APPENDIX D (continued)

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APPENDIX D (continued)

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APPENDIX D (continued)

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APPENDIX D (continued)

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AGE2 GENDER2 RACE2 REASON2 LENGTH2 OUTCOM2
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